**PACE @ Wellington**

**Woodinville, Washington**

**Financial Contribution Form**

Parent / Guardian Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Student Name(s)** | **Grade(s)** |
|  |  |
|  |  |
|  |  |

Cost for the 2014-2015 school year (per student)\*: $175.00

Enrollment Fee already paid (per student): - $40.00

Flat Fee (per student): $135.00 x \_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_

*\* Pending budget approval at the September General Meeting*

*1 student = $135.00 2 students = $270.00 3 students = $405.00*

**Please make your check payable to *PACE @ Wellington.***

**PLEASE CHOOSE FROM THE FOLLOWING 3 OPTIONS:**

\_\_\_\_ **Option 1 –** I would like to pay the Flat Fee now in one lump sum.

I have enclosed a check for the amount of $ check # \_\_\_\_\_\_\_\_

\_\_\_\_ **Option 2 –** I would like to pay 50% of the Flat Fee now and the second 50% on or before January 31, 2015. (You will be sent an email reminder in mid-January.)

I have enclosed a check for the amount of $ check # \_\_\_\_\_\_\_\_

\_\_\_\_ **Option 3 - SCHOLARSHIP:** My family has special financial considerations and I would like to request that a full or partial scholarship be made available for my child(ren) for the 2011-2012 school year. I understand that my request will be kept confidential. (You will be contacted for more information).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent / Guardian Signature Date**