



# ST. DOMINIC SAVIO CATHOLIC HIGH SCHOOL

## BUS CONTRACT for 2016 – 2017: One per student

### COST AND POLICY

The cost for bus service per student is \$1,100 for the school year. There is no pro-ration of bus fees for students who ride part-time. If you need to cancel, notice must be given at least two weeks in advance. Otherwise, there will be no pro-ration or refund of bus fees. **All contracts are due by May 13, 2016.** For questions, contact Mrs. Nguyen, [lnguyen@saviochs.org](mailto:lnguyen@saviochs.org).

### BUS STOP PREFERENCES

Please indicate below your preference of the following bus stops. **Please select a 1<sup>st</sup> and 2<sup>nd</sup> choice.**

\_\_\_\_\_ St. Helen Catholic School/Church

\_\_\_\_\_ St. Louis Catholic School/Church

\_\_\_\_\_ St. William Catholic Church

\_\_\_\_\_ St. Theresa Catholic School/Church

\_\_\_\_\_ St. Ignatius Catholic School/Church

**Please return one registration form for each student rider to St. Dominic Savio before May 13, 2016. Final bus routes and pick up times will be shared with our families by the middle of June.**

### PAYMENT PREFERENCES *(Please complete one contract per student.)*

**2016-2017 CONTRACT – needs to coincide with your monthly plan:**

\_\_\_\_\_ Monthly plan: This plan be drafted on the 25<sup>th</sup> of the month through FACTS.

11 month plan - Add the \$100 monthly bus fee per student to my FACTS contract.

10 month plan - Add the \$110 monthly bus fee per student to my FACTS contract.

\_\_\_\_\_ I would like to pay in full for the year. (You will receive an incidental bill for \$1,100) payable by FACTS and due on August 1, 2016.

*We understand that we must cancel at least 15 days prior to the draft day. (FACTS only)*

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Student Name \_\_\_\_\_ (one form per student)

Address \_\_\_\_\_  
Street City State ZIP

Parent's Name \_\_\_\_\_

Family Phone Number \_\_\_\_\_ Family E-mail \_\_\_\_\_

Parent(s) Signature(s) \_\_\_\_\_

Date \_\_\_\_\_