

# Our Lady of Joy Catholic School

36811 N. Pima Rd. P.O. Box #1359  
Carefree, AZ 85377-1359

Telephone # (480) 595-6409

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## Policy and Financial Agreement

Family Name: \_\_\_\_\_

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Class: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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The signature(s) below verify agreement to the following:

- I/we have received the *Parent Handbook* and will read and adhere to the policies therein.
- I/we am/are aware of the financial obligation as it pertains to payment of tuition, as stated in the *Handbook*, and agree to the terms.

Parent/Guardian's Name:

Signature:

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_