Bishop Dunn Memorial School



Located on the Mount Saint Mary College Campus 50 Gidney Avenue, Newburgh, New York 12550 (845) 569-3494 Fax (845) 569-3303 www.bdms.org

TUITION CONTRACT

STUDENT NAME: _____ID #: _____

I understand and acknowledge the following:		
June and end in March through the FACTS	y payment plan contract. Tuition payments start in TS tuition company. If I choose not to join FACTS e school year begins. A late payment fee will be not satisfied by the due date.	
 It is my responsibility to complete and subm in a timely manner. 	bmit all enrollment and tuition forms and information	
 I understand that Bishop Dunn Memorial S past due balance incurred. I agree that in th of collection. These costs may include late f and court costs or any other cost associate owed to BDMS. 	is event, I will be responsible for an ees, interest, collection costs and/o	y and all costs r attorney fee:
 I hereby grant permission for Bishop Dunn using any method available including but no dialer systems; also, any information furnish my representatives. This information suppli- cell phone numbers, e mail addresses, ho supplied to the School. 	of limited to the use of email, text a ned to the School may be used to ed to the School may include but is	and automated contact me of a not limited to
 I understand that I will not be permitted to long as I have an outstanding financial obligation 		
Parent or Guardian Signature	Date	
Parent or Guardian Social Security Number		
Parent or Guardian Signature	Date	
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Parent or Guardian Social Security Number		

PLEASE COMPLETE, SIGN AND RETURN TO FINANCE OFFICE