

ISMET/OIA Monthly Tuition Transfer Authorization Form

Muslim Educational Trust

Phone: (503) 579-6621

Fax: (503) 590-0201

I hereby authorize the Muslim Educational Trust (MET) to perform the following transfer:

FROM: (Please include a signed voided check with amount of transfer shown)

Bank Account of: _____ (name of account holder)

Name of Bank/Financial Institution: _____

Debit Deposit Account #: _____ RT/Routing #: _____

Type of Account (please check one): Checking _____ Savings _____

TO: Muslim Educational Trust (MET) Bank Account:

Name of Bank/Retail Center: US BANK SW 4th AND HARRISON BRANCH

Credit Deposit Account #: 153-603-717197 RT/Routing #: 123-000-220

STUDENT NAME(S): _____

STUDENT GRADE(S): _____

TUITION TRANSFER Request:

Monthly Tuition*: \$ _____ (see tuition scale below)

Curriculum & Facility Use Fees: \$ _____ (\$400 per student per year)

Testing Fees**: \$ _____ (see testing fees below)

After-School Child Care: \$ _____ (check handbook for monthly rates)

TOTAL to pay per month: \$ _____

*Monthly Tuition: Preschool: \$700 / Kindergarten: \$775 / Grades 1-5: \$875 / Grades 6-8: \$900 / Grades 9-12: \$925
Please note \$25 discount per additional sibling excluding Preschool; refer to handbook for details.

**Annual Testing Fees: \$50 per student (Grades KG, 1, 2); \$60 per student (Grades 3, 5, 8)
(not including AP Exams)
\$25 (Grade 10); \$85 (Grade 11)
\$20 (Grades 6, 7, 8) – Valley Catholic Tournament

Total Amount to be Transferred MONTHLY: \$ _____ STARTING MONTH: _____

TIMING OF TRANSFER: Please MARK WHICH day of month to make your monthly tuition transfer:

Please note that Tuition (thru June) is DUE within the first 5 business days of the month.

- 1st of the month
- 5th of the month
- 10th of the month
- 15th of the month

SIGNED AUTHORIZATION:

Name: _____ (please print)

Signature: _____ Today's date: _____