



**2024-2025 ST. MARK CATHOLIC SCHOOL
MULTIPLE PAYEE AGREEMENT FORM**

Please use this form if **different parties will be responsible for paying for different accounts** (tuition, lunch, etc.) or for different children (i.e. grandparent paying for one student and parents paying for another). **Each responsible party must provide complete contact information and sign this form.**

Note: If a family provides more than one form for convenience purposes, please ensure the percent each responsible party agrees to pay match from form to form. ****Note: Other % includes field trips, lost books, extracurricular fees, etc.**

Responsible Party Name	Tuition %	Lunch Fees %	After-School Care %	**Other %
#1:				
#2:				
#3:				

RESPONSIBLE PARTY #1

Responsible Party Address: _____

Responsible Party Telephone(s): _____ (Home) _____ (Cell)

Responsible Party Email: _____

Responsible Party Relationship to Student(s): _____

RESPONSIBLE PARTY SIGNATURE

DATE

RESPONSIBLE PARTY NAME

RESPONSIBLE PARTY #2

Responsible Party Address: _____

Responsible Party Telephone(s): _____ (Home) _____ (Cell)

Responsible Party Email: _____

Responsible Party Relationship to Student(s): _____

RESPONSIBLE PARTY SIGNATURE

DATE

RESPONSIBLE PARTY NAME

RESPONSIBLE PARTY #3

Responsible Party Address: _____

Responsible Party Telephone(s): _____ (Home) _____ (Cell)

Responsible Party Email: _____

Responsible Party Relationship to Student(s): _____

RESPONSIBLE PARTY SIGNATURE

DATE

RESPONSIBLE PARTY NAME