

Lancaster Mennonite School  
Tuition Payment Plans  
International Students



Return this signed Agreement immediately to finalize student course requests and grade placement for the upcoming school year. Please make a copy for your records. If your student is not returning, complete only Part III, sign and return to us. Thank you! Return to: [shultzej@lancastermennonite.org](mailto:shultzej@lancastermennonite.org) or mail to LMS Business Office, 2176 Lincoln Highway East, Lancaster, PA 17602. USA

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**Part I – Please print**

First Parent/Guardian (full name) \_\_\_\_\_ Address \_\_\_\_\_

Second Parent/Guardian (full name) \_\_\_\_\_ Address \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Home Email Address \_\_\_\_\_

Student Name 1 \_\_\_\_\_ Birth Date \_\_\_\_\_ Upcoming Grade \_\_\_\_\_

2 \_\_\_\_\_ Birth Date \_\_\_\_\_ Upcoming Grade \_\_\_\_\_

Student Address \_\_\_\_\_  
If different than parent's home address

Student Telephone Number \_\_\_\_\_ Student Email Address \_\_\_\_\_

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**Part II – Payment**

**Payment for the full year is required by July 1:**

Check one:

Payment by check, cash or money order

Payment by electronic wire. Information on wiring payment will be provided with your annual invoice.

**I/We anticipate the following discount:**

\_\_\_\_ 2<sup>nd</sup> or additional child discount

**I/We anticipate the following fees:**

\_\_\_\_ ELL – English Language Learning

\_\_\_\_ Residence Hall \_\_\_\_ 4 day \_\_\_\_ 7 day

**Donation to Annual Fund:**

\$100       \$500       \$1,000       Other amount \$ \_\_\_\_\_

The business office will calculate your payment to reflect any discount, and will provide a final statement of charges for your records. Call Erma Shultz at 717-740-2433, or contact through email, [shultzej@lancastermennonite.org](mailto:shultzej@lancastermennonite.org) if you have questions or for wire information. Lancaster Mennonite School's fax number is 717-509-4088.

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**Part III – Your signatures:** We agree to pay tuition and fees (less any discounts) according to Lancaster Mennonite's tuition policy. **We understand that our child/children will be able to attend school only when the payment is made.**

Signature of first parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of second parent/guardian \_\_\_\_\_ Date \_\_\_\_\_