



TRINITAS Classical School

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Please complete and return this form as early as possible. In order for adjustments to be made to FACTS Tuition Management before the first scheduled payment, this form must be received before June 1. Once you receive an invoice from Trinitas, it is your responsibility to see that the contributing party identified below receives a copy. In the event that the contributing party does not meet their intended contribution, you acknowledge your responsibility for any remaining balance.

THIRD PARTY FINANCIAL AID FORM

Financial assistance for the _____ school year

in the amount of _____
(total amount for all children)

is anticipated by _____
(name of congregation, employer, or other party)

(address)

(contact person)

(contact's telephone)

(contact's email)

Parent or Guardian Signature

Date