

**Kindergarten – Eighth Grade
2009-2010 School Year Application**

Date _____

Family Name _____
Last Mother Father

Address _____
Street City Zip Home Phone

Father Day/Cell # _____ Mother Day/Cell # _____

Religion: Roman Catholic _____ Eastern Catholic _____ Orthodox _____ Other (please specify) _____

Parish/Envelope# _____ Language Spoken in Home _____

Ethnic Group: Asian _____ Black _____ Hispanic _____ Native American _____ Caucasian _____ Other _____
(Required for State Report)

Child's Name _____ Grade Entering _____ Birthdate _____ M _____ F _____

Kindergarten AM _____ Full Day _____

Religion: Roman Catholic _____ Eastern Catholic _____ Orthodox _____ Other (please specify) _____

Baptism: Date _____ Church _____
City/State

Reconciliation: Date _____ Church _____
City/State

First Eucharist: Date _____ Church _____
City/State

School last attended _____
City/State

Child's Name _____ Grade Entering _____ Birthdate _____ M _____ F _____

Kindergarten AM _____ Full Day _____

Religion: Roman Catholic _____ Eastern Catholic _____ Orthodox _____ Other (please specify) _____

Baptism: Date _____ Church _____
City/State

Reconciliation: Date _____ Church _____
City/State

First Eucharist: Date _____ Church _____
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City/State

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City/State _____

School last attended _____
City/State _____

For Office Use Only:

Tuition Option _____ Registration Fee _____ Health Forms _____ Birth Cert. _____ Trans. Of Record Form _____

Important Financial Information

Tuition Payment Options

_____ **Full-Payment:** Total tuition paid in full June 1, 2009, 3% discount will be applied. Full tuition payments are made in the school office.

_____ **Two F.A.C.T.S.-Payments plan**

First payment due June 1st equaling half of tuition total

Second payment due November 1st (remainder of tuition owed)

A \$15.00 registration fee will be deducted upon receipt of your contract

_____ **Monthly F.A.C.T.S.-Payments plan**

Payments are budgeted over 10 months beginning June 1st. A monthly withdrawal is automatically made from a checking/savings account per your instructions. A \$38.00 registration fee is deducted upon receipt of your contract.

(Credit Card Payments: Tuition and fees may be paid in full using a credit card in the school office.)

Scholarship Information

We accept various scholarships. A scholarship package is available. Please inquire in the school office if you did not receive one with your Registration Package.

"In-Parish" Tuition

The total cost of parochial education is always high; to offset that amount, the Parish subsidizes the complete cost of each child's education. To be eligible for the In-Parish tuition rates you must register as a Parishioner in the Parish Office. Mass attendance and a weekly contribution of \$15.00 is expected (to ensure accurate tracking please use your Parish Envelope). A family's In-Parish status will be reviewed each January. Whenever possible, we ask that you contribute above the required amount to assist with the expenses of the quality education provided here at St. Genevieve School.

Mandatory Fundraising Obligation

Each family is required to either sell \$100.00 of raffle tickets (\$5.00 a piece) plus volunteer 15 hours of time through various activities, or to sell \$200.00 worth of raffle tickets. If your only child in the school is in the 4-year-old Pre-Kindergarten Program then your requirement is 1 book of raffle tickets and 2 hours of volunteer time within the classroom or school activity of your choice. Three-year-old preschool students are not obligated to fulfill this requirement.

St. Genevieve Catholic School does not discriminate in any way. If you are experiencing special financial circumstances or require a different payment option, please speak with our Principal Mrs. Beth Flack, or with Mrs. Wilk.

AUTHORIZATION FOR RELEASE OF STUDENT RECORDS

Please release the following student record(s) to St. Genevieve School:

Student Name: _____

Birthdate: _____ Grade in September _____

Student Name: _____

Birthdate: _____ Grade in September _____

Student Name: _____

Birthdate: _____ Grade in September _____

Student Name: _____

Birthdate: _____ Grade in September _____

Student Name: _____

Birthdate: _____ Grade in September _____

Entering Saint Genevieve School from:

School: _____

Address: _____

Fax #: _____

I authorize the release of all educational records and documents pertaining to my child(ren) as named above to Saint Genevieve School.

Parent/Guardian Signature

Date: _____