

## **PRE SCHOOL FORMS ORDER**

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## **2010-2011 PRE KINDERGARTEN ADMISSION REQUIREMENTS**

- Pre K 3 – Child must be 3 years of age by September 1, 2010.
- Pre K 4 – Child must be 4 years of age by September 1, 2010.

Admission is based upon openings in each class. Students who are parishioners of St. Pius X Church and siblings of those who are already enrolled are given priority.

Parents seeking admission for their child must formally register their child during open registration on Thursday, March 11<sup>th</sup> and Friday, March 12<sup>th</sup> from 9:00 AM till 2:00 PM by submitting the completed paperwork to school.. Dates and times will also be announced on our web site, church bulletins and local newspapers. If the open registration dates have passed, parents may contact Mrs. Feist at the school office for an appointment.

**Acceptance cannot be determined without all the appropriate paperwork completed.**

Parents should print out the Pre K Registration paperwork, complete, and bring to the open registration along with:

- Copy of birth certificate
- Copy of Baptismal record (if applicable)
- Current physical or proof of immunization
- Emergency Form neatly completed with: home, work, and cell phone numbers; email addresses; and at least two other contact people in case of any emergency.

### **Upon Acceptance:**

- \$100.00 registration fee must be paid within one week to finalize acceptance.
- Tuition payment option selected and processed.

**SCHOOL UNIFORMS:** Measure: Thursday, May 6, 2010 from 2 PM – 3:30 PM church hall.  
Delivery: Saturday, July 10, 2010 from 10-12 Noon at church hall.

**EXTENDED DAY:** An extended day option is available to parents on a daily basis or as needed. This program begins at 7:30 AM and ends at 5:30 PM. The cost is minimal and separate from tuition fees.

**SAINT PIUS X SCHOOL  
REGISTRATION FORM – 2010-2011**

DATE: \_\_\_\_\_

OFFICE: \$100.00 registration fee  
(non-refundable)

REGIS. FEE

Date paid: \_\_\_\_\_

Check #: \_\_\_\_\_

Verified by: \_\_\_\_\_

Please print the following:

**NAME OF CHILD** \_\_\_\_\_

LAST

FIRST

MIDDLE

Address: \_\_\_\_\_ Telephone \_\_\_\_\_

Street

Zip Code \_\_\_\_\_

Town

Child's Birth Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Month Day Year

Child's age in September \_\_\_\_\_ Birth verified (OFFICE) \_\_\_\_\_

Adoption papers \_\_\_\_\_

Parish to which child belongs \_\_\_\_\_

Street

City

State

Grade entering \_\_\_\_\_ Last school attended \_\_\_\_\_

Current grade \_\_\_\_\_ Address of last school: \_\_\_\_\_

Street

City

State

**SACRAMENTS RECEIVED**

Baptism: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ at Church \_\_\_\_\_

Month day year

Name of church

City

State

First Communion: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ at Church \_\_\_\_\_

Month day year

Name of church

City

State

Confirmation: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ at Church \_\_\_\_\_

Month day year

Name of church

City

State

**FATHER:** \_\_\_\_\_ Occupation: \_\_\_\_\_

Last

First

Middle

Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

City

State

Month day year

Religion: Catholic \_\_\_\_\_ Christian \_\_\_\_\_ Non-Christian \_\_\_\_\_

Married \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried \_\_\_\_\_ Single \_\_\_\_\_ Step \_\_\_\_\_ Widower \_\_\_\_\_

**MOTHER:** \_\_\_\_\_ Occupation: \_\_\_\_\_

Last

First

Maiden

Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

City

State

Month Day Year

Religion: Catholic \_\_\_\_\_ Christian \_\_\_\_\_ Non-Christian \_\_\_\_\_

Married \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried \_\_\_\_\_ Single \_\_\_\_\_ Step \_\_\_\_\_ Widower \_\_\_\_\_

**LEGAL GUARDIAN (if applicable)** \_\_\_\_\_

Last

First

Middle

Address: \_\_\_\_\_

Street

City

State

Zip Code

**(Complete page 2)**

**SAINT PIUS X SCHOOL REGISTRATION FORM – 2010-2011 PAGE 2**

The undersigned agrees to abide by all of the decisions set forth by the St. Pius X School Administration and Board and recognizes that this is a binding contract.

SCHOOL CORRESPONDENCE SHOULD BE ADDRESSED AS:

Mr. & Mrs.| Mrs.| Mr.| Miss| Ms. \_\_\_\_\_

SIGNATURE OF MOTHER: \_\_\_\_\_

SIGNATURE OF FATHER: \_\_\_\_\_

SIGNATURE OF GUARDIAN: \_\_\_\_\_

**NOTE: The school will afford both parents full access to the child and to his/her records, teachers and other pertinent information *unless* legal papers indicate otherwise. A' court certified copy of a divorce decree is required for the office files.**

**ST. PIUS X SCHOOL  
RE-ENROLLMENT/ENROLLMENT CONTRACT  
2010-2011 SCHOOL YEAR**

(Circle Choice)

Student Name/s \_\_\_\_\_ Grade \_\_\_\_\_ Pre K \_\_\_\_\_ 5 Full or 5 Half    3 Full or 3 Half  
\_\_\_\_\_ Grade \_\_\_\_\_ Pre K \_\_\_\_\_ 5 Full or 5 Half    3 Full or 3 Half  
\_\_\_\_\_ Grade \_\_\_\_\_ Pre K \_\_\_\_\_ 5 Full or 5 Half    3 Full or 3 Half  
\_\_\_\_\_ Grade \_\_\_\_\_ Pre K \_\_\_\_\_ 5 Full or 5 Half    3 Full or 3 Half

ADDRESS: \_\_\_\_\_

Pre K and Kindergarten: Child's age as of September 1, 2010: Year \_\_\_\_\_ Months \_\_\_\_\_ D.O.B. \_\_\_\_\_

I would like to register a new incoming sibling: \_\_\_\_\_ Grade \_\_\_\_\_

PARISH REGISTERED AT: \_\_\_\_\_

\_\_\_\_\_ I wish to reserve a place for my child/ren listed above at St. Pius X School for the 2010-2011 school year. It is understood my child/ren is/are enrolled for the entire year and that I am liable for all expenses incurred during the period of enrollment. **(Current Families Only:** I am enclosing a non-refundable \$100.00 registration fee per child due March 3, 10. \$15.00 late fee after March 3<sup>rd</sup>. **New Families:** \$100.00 to be paid no later than (1) one week after acceptance.

**The tuition rate for the 2010-2011 school year is:**

K-8 \$4600.00    Pre Kindergarten 5 Full Days \$4850.00    Pre Kindergarten 5 Half Days \$4650.00  
Pre Kindergarten 3 Full Days \$4425.00    Pre Kindergarten 3 Half Days \$4225.00

**Tuition will be paid according to one of the following three plans:**

- \_\_\_\_\_ Option 1: Full tuition paid by June 15
- \_\_\_\_\_ Option 2: Facts Automatic Tuition Payment Agreement Semi-Annually (2) June 15 and Sept 15
- \_\_\_\_\_ Option 3: Facts Automatic Tuition Payment Agreement Ten (10) Monthly Payments **(July-April)**.

\_\_\_\_\_ **Grades K-8 Only: I will be applying for financial aid through \_\_\_\_\_ Parish. Families seeking aid will have an estimated payment plan in place until actual amount of aid is determined.**

1. Mandatory Fund Raising Fees are payable as follows: Each family will be assessed a fund raising obligation of \$250.00 per family which may be met by purchasing and/or selling (25) \$10.00 raffle tickets at the beginning of the school year. Re-registration of currently enrolled students will not be held if the fund raising obligation is not met by the announced deadline.
2. Delinquent Accounts: Students whose accounts are forty-five (45) days in arrears will not be allowed to continue classes until all payments are brought up to date. Tuition payments must be fulfilled in order to register for the following year.

\_\_\_\_\_ **NO, My child/ren will not be returning to St. Pius X in September 2010**

I do hereby enter into agreement with St. Pius X School that I, the undersigned parent/guardian will comply with the school's rules and regulations and we will accept those decisions made by the school board and administration. I recognize that this is a binding contract.

\_\_\_\_\_  
(Signature Parent/Guardian)

\_\_\_\_\_  
(Date)

**SAINT PIUS X SCHOOL  
FAMILY EMERGENCY INFORMATION – 2010/2011**

**DATE FORM COMPLETED:** \_\_\_\_\_

**PLEASE PRINT CLEARLY:**

List children at St. Pius X School ONLY, and begin with oldest child.

**STUDENT'S NAME:** \_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_  
2010-2011  
\_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_  
2010-2011  
\_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_  
2010-2011  
\_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_  
2010-2011

**ADDRESS:** \_\_\_\_\_ Phone \_\_\_\_\_  
Street  
\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

**FATHER:** \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Work Number \_\_\_\_\_ Extension \_\_\_\_\_ Cell # \_\_\_\_\_  
Please use correct dialing sequence  
Place of employment: \_\_\_\_\_  
Married \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried \_\_\_\_\_ Widower \_\_\_\_\_ Step \_\_\_\_\_ Single \_\_\_\_\_  
Restriction \_\_\_\_\_ with whom? \_\_\_\_\_

**MOTHER** \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Work Number \_\_\_\_\_ Extension \_\_\_\_\_ Cell # \_\_\_\_\_  
Please use correct dialing sequence  
Place of employment: \_\_\_\_\_  
Married \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried \_\_\_\_\_ Widower \_\_\_\_\_ Step \_\_\_\_\_ Single \_\_\_\_\_  
Restriction \_\_\_\_\_ with whom? \_\_\_\_\_

**NAME OF RELATIVE OR NEIGHBOR:**

Relationship (of above) to child: \_\_\_\_\_ Work # \_\_\_\_\_  
Home # \_\_\_\_\_  
**DOCTOR:** \_\_\_\_\_ Phone # \_\_\_\_\_

**HOSPITAL** \_\_\_\_\_  
Parish at which family is registered: \_\_\_\_\_

**PLEASE LIST ANY MEDICAL PROBLEM:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Be advised** – the school should be **notified** of any **new information** regarding **medical problems** your child may have. The school should also be notified of any change in **address, phone numbers** or **work place.** **PAGE 1 – PLEASE COMPLETE PAGE 2** →

**PAGE 2 OF EMERGENCY FORM**

**Please list e-mail address(es) below. All notices and newsletters will be sent to the addresses you give us. If you do not have internet access, please indicate. Thank you.**

**Name:** \_\_\_\_\_

**e-mail address** \_\_\_\_\_

**e-mail address** \_\_\_\_\_

check here if you do not have internet access

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**EXTENDED DAY INFORMATION**

Extended Day is offered to all parents every day. Please list below the names and phone numbers of all designated adults authorized to pick up your children from our Extended Day program. **Only those listed below will be authorized to pick up your children, unless we have written documentation from you to add others.**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**SAINT PIUS X SCHOOL  
SPECIAL NEEDS INFORMATION**

Student's name:

Grade in September of 2010:

Date of Birth:

St. Pius X School offers a variety of educational services in order that each child's individual academic needs will be met. Please assist us in properly providing service for your child by completing the following questionnaire.

1. Has your child received special needs services as part of their school placement?  
YES\_\_\_\_\_ NO\_\_\_\_\_
  
2. If answer to question 1 is YES, please explain by checking all appropriate responses:  
Speech or Language therapy\_\_\_\_\_ Advanced placement for math\_\_\_\_\_  
Remedial services for reading\_\_\_\_\_ Advanced placement for reading\_\_\_\_\_  
Remedial services for math\_\_\_\_\_ Advanced placement for English\_\_\_\_\_  
Remedial services for English\_\_\_\_\_  
Special education/Resource classroom\_\_\_\_\_  
Special education/self-contained classroom\_\_\_\_\_
  
3. Has your child been referred for learning disabilities? YES\_\_\_\_\_ NO\_\_\_\_\_
  
4. If answer to questions 3 is YES, was the testing done? YES\_\_\_\_\_ NO\_\_\_\_\_
  
5. Has your child had an individualized educational program (IEP)? YES\_\_\_\_\_ NO\_\_\_\_\_
  
6. Has your child been diagnosed with Attention Deficit Disorder? YES\_\_\_\_\_ NO\_\_\_\_\_
  
7. Is your child currently taking medication? YES\_\_\_\_\_ NO\_\_\_\_\_  
EXPLAIN: \_\_\_\_\_
  
8. Has retention ever been suggested for your child? YES\_\_\_\_\_ NO\_\_\_\_\_  
If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_
  
9. Are there any other special needs that St. Pius X School should be aware of at this time?  
YES\_\_\_\_\_ NO\_\_\_\_\_ Please explain: \_\_\_\_\_

By my signature, I attest to the fact that the information given above is correct and complete, to the best of my knowledge.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**SAINT PIUS X SCHOOL**

**PRE KINDERGARTEN TUITION RATES AND PAYMENTS 2010-2011**

F.A.C.T.S ID #06052      PRE K 3      AND      PRE K 4

<b>TUITION CHOICES:</b>	<b><u>5 FULL DAYS</u></b>	<b><u>5 HALF DAYS</u></b>	<b><u>3 FULL DAYS</u></b>	<b><u>3 HALF DAYS</u></b>
	\$4,850.00	\$4,650.00	\$4,425.00	\$4,225.00

***OPTION I***

One payment – June 15	\$4,850.00	\$4,650.00	\$4,425.00	\$4,225.00
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Paid directly to St. Pius X School. If payment date is missed, family will be enrolled in the FACTS Automatic Withdrawal Payment Plan.

***OPTION II F.A.C.T.S Automated Withdrawal***

2 Payment Plan	\$2,425.00	\$2,325.00	\$2,212.50	\$ 2,112.50
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June 15<sup>th</sup> and September 15th

10 months July – April	\$ 485.00	\$ 465.00	\$ 442.50	\$ 422.50
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## Tuition Refund Policy

When parents/guardians reserve an enrollment place for their children in St. Pius X School, they agree that their children are enrolled for the entire school year and that the parents/guardians are responsible for the regular tuition as well as other expenses incurred during the school year.

**Registration:** Registration fees are not refundable and are assessed yearly to all students regardless of when they enroll in the school year.

**Tuition:** Cancellation of enrollment must be made in writing to the school office for possible refund consideration by the parent/guardian. Refunds will be considered when the parent/guardian has signed an official notice of transfer/withdrawal at the school office.

Cancellations **prior to the August 1** will be charged one month of the annual tuition and the remainder of paid tuition refunded.

Cancellations **after August 1** and before the first day of school will be charged two month's of the annual tuition and the remainder of paid tuition refunded.

Cancellations **after October 10** will not be refunded.

Consideration may be considered with special circumstances at the principal's discretion.

**SAINT PIUS X SCHOOL**

**RELIGION PROGRAM FOR NON-CATHOLIC STUDENTS**

**Dear Parents/Guardians,**

I am happy that your family and children are part of our school family. For several years our enrollment has consisted of families of different faiths and beliefs, and because our values and love of God have always been the same, all our classroom subjects including Religion have run smoothly.

Our school policy is that all students must participate and be graded in all subjects, Religion included.

As a part of our school family, your child must participate fully in our classroom Religion study, in school prayers, and also in our Mass, with the exception of Communion. If you have any questions about this school policy, please call for an appointment.

God Bless You,

Henry Fiore, Jr.  
Principal

This letter becomes part of your child's cumulative folder. If you agree with the above, please sign and date. Thank you.

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_