

ST AUGUSTINE PRESCHOOL
2010 – 2011
REGISTRATION INFORMATION

THREE-YEAR-OLD PROGRAM

Two Day Program Mornings: Tuesday, Thursday – 9:00-11:00AM

FOUR-YEAR-OLD PROGRAMS

Three Day Program Mornings: Monday, Wednesday, Friday: 8:30 – 11:00AM
Three Day Program Afternoons: Monday, Wednesday, Friday: 12:00 – 2:30 PM
Two Day Program Afternoons: Monday, Wednesday: 12:00 – 2:30 PM

TUITION

<u>Three-Year-Old</u>	<u>Four-Year-Old</u>	
	Two Day	Three Day
\$1,100.00	\$1,100.00	\$1,550.00

FEES

Registration (Per child)	\$ 55.00 (Non-Refundable)
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CONSIDERATION FOR ADMISSION AND SESSION PREFERENCE

1. Child has siblings in grade school program (K-8).
2. Family is registered and active in St. Augustine Parish or other Blue Water Vicariate parish.

Those who choose to be active members of St. Augustine Parish includes those:

- *Having a current registration form on file in the parish offices.
- *Participating in weekly liturgy.
- *Meeting the individually chosen parish financial support commitment.
- *Cooperating with parish appeals by responding to requests for help, information, or financial support in a timely fashion.

3. Child is already in preschool program.
4. Others as openings allow.

This dynamic relationship will help guarantee the integrity and well being of our parish community and maintain our foundation roots as together we provide vision for the future. Membership will be evaluated based on one's ongoing activity and commitment to St. Augustine parish during the previous calendar year.

PRESCHOOL REGISTRATION
2010 - 2011

Preschool Class 2010-2011

Please check preference:

_____ 3year old, TU, TH, - AM

_____ 4year old, M, W, F, - AM

_____ 4 year old, M, W, F, - PM

_____ 4 year old, M, W, - PM

We will do the best we can to honor your request, but there are no guarantees. See "Registration information" sheet for Placement consideration policy.

Identification:

Child's Name: _____
Last First Middle

Address: _____ Phone: _____

City: _____ State: _____ Cell: _____

Zip: _____

Age: _____ Gender: _____ Date of Birth: _____ Place of Birth: _____

Baptized: No ___ Yes ___ Date: _____ Religion: _____ Parish: _____

Envelope# _____

Family Information:

Mother (or Guardian): _____
Last First

Address: _____
Street City State Zip

Phone: _____ Occupation: _____

Place of Employment: _____ Work Phone: _____

Father (or Guardian): _____
Last First

Address: _____
Street City State Zip

Phone: _____ Occupation: _____

Place of Employment _____ Work Phone: _____

Other Children in Family:

Name _____ Age _____ School _____ Grade _____

Name _____ Age _____ School _____ Grade _____

In registering my child (ren) in St. Augustine School, I agree to...

*support and adhere to all policies, procedures, and functions of the school

*become actively involved in the life of the school and parish by

volunteering time and talent to school activities

Signature of Father or Legal Guardian: _____

Signature of Mother or Legal Guardian: _____

2010-2011

SOME INFORMATION ABOUT:

YOUR PRESCHOOL CHILD'S NAME

Which of the following behaviors have you observed?

Friendly _____

Withdrawn _____

Courteous _____

Generous _____

Leader _____

Follower _____

Shy _____

Verbally Expressive _____

Cooperative _____

Aggressive _____

Curious _____

Sympathetic _____

Other: _____

Special Interests: _____

Fears: _____

Speech and/or Language Difficulties: _____

Health:

Does your child have any known allergies? ____ Explain: _____

Are any medications given regularly? ____ If yes, explain _____

Are there any physical, medical, or emotional conditions? ____ If yes, explain. _____

Toilet Habits:

Can your child indicate his/her bathroom need? _____

Does s/he have frequent accidents? _____

Does your child need help in the bathroom? _____

In what particular ways do you hope the preschool program will help your child's development this year?

How did you learn about St. Augustine's Preschool? _____

**ST AUGUSTINE PRESCHOOL
TUITION CONTRACT
2010 – 2011**

This "Agreement" is made and entered into between St. Augustine Catholic School and _____, who is/are the _____ (name)

(check one):

- Parent(s)
- Legal Guardian(s)
- Other (explain)

of the following Students:

<u>Name</u>	<u>Grade</u>	
_____	_____	("Student(s)")
_____	_____	("Student(s)")
_____	_____	("Student(s)")
_____	_____	("Student(s)")
_____	_____	("Student(s)")

(List all students by name and grade)

Payment of Tuition:

1. The undersigned agrees to pay tuition for the entire School Year (August through June) in the amount of _____ ("Tuition"). Parents shall select a payment plan for Tuition from among the options set forth in Appendix I ("Payment Plan"). All Tuition payments shall be made in accordance with the Payment Plan.
2. If a Tuition payment is forty-five (45) days overdue, the School may impose any or all of the following sanctions, at the School's sole discretion, unless special payment arrangements have been made in a writing signed by the School's principal or administration. Sanctioned actions include:
 - a. Assess late fees
 - b. Withholding Academic Records
 - c. Disallowing Student's participation in sports or other school activities
 - d. Withdrawing Student from class participation
 - e. Withdrawing Student from school.
 - f. Use a collection agency
 - g. File a claim in court
3. A Family with an unpaid balance for the current School Year may not register for the following School Year until the Tuition for the current School Year is paid in full, unless special payment arrangements have been made in a writing signed by School's principal or administrator. School records, diplomas or transcripts will not be released until all Tuition and other charges have been paid in full.

Refunds:

4. If the Student is withdrawn, for any reason other than request by School or mutual agreement, during the School Year, remaining Tuition through the end of the year must be paid in full unless the School principal or administrator agrees in writing to refund a portion of the remaining Tuition. Otherwise, there will be no refund, credit or reduction for withdrawal, absences, vacations, snow days, illnesses, holidays or moving.
5. If a Student is asked to leave or withdraw from the School, the undersigned is responsible for the prorated annual Tuition through the end of the month in which the Student withdraws.
6. Prepaid Tuition will be refunded in full only if cancellation is made, in writing to the School, within one day prior to the first day classes are scheduled to start.

General Terms and Conditions:

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FEES

Registration (**Per child**) \$ 55.00
(Non-Refundable)

7. Prior to completing the registration process, payment of a non-refundable registration fee in the amount of \$ 55.00 (“Registration Fee”) is required. The Registration Fee is non-refundable for any reason, including but not limited to, a denial of a Student’s application.
8. The term and conditions of the School’s enrollment and other policy information which may be provided to the Student are hereby incorporated into this Agreement by reference.
9. It is further understood, that the Student and Student’s parents/guardians, will abide by the policies and guidelines as documented in the School handbook.
10. To qualify for IN-VICARIATE FAMILY TUITION RATES a family must be registered at a Parish within the Vicariate, worship regularly, participate in Parish activities, and participate in Parish/School fundraising.
11. Service hours — All families with Students enrolled in Kindergarten through 8th grade, are expected to participate in 30 credits of service by the final day of school. Those families who cannot participate in service credits have the option of buying their service credits at a rate of \$25.00 per credit. Any service credits not completed will be charged a \$25.00 per credit fee.
12. Returned checks: All returned checks will incur a fee of \$25.00. If two checks are returned for insufficient funds, School will no longer accept personal checks and you will be required to pay in cash or with a certified check from a local bank.
13. I/We understand that a place will be reserved for our Student(s) only if this form and the Deposit and Registration Fees are submitted with this Agreement. I/We understand that

acceptance of enrollment depends on Student's successful completion of the current School Year and on full payment of all Tuition and fees for the current and/or prior School Years.

14. I/We understand that School reserves the right to deny enrollment and/or expel a Student whom it determines is unsuitable for enrollment.

I/We, the undersigned, have read and understand the Terms and Conditions of this Agreement, for the enrollment of Student for the 2010-11 School Year. I/We agree to abide by said Terms and Conditions and agree to fulfill the total financial obligation for payment of Tuition as set forth herein.

Signature of Parent/Legal Guardian/Other

Date _____

Address

Phone

Signature of Parent/Legal Guardian/Other

Date _____

Address

Phone

TUITION CONTRACT

Appendix I

PAYMENT PLAN ALTERNATIVES

The School offers the following Payment Plans. Please choose one:

OPTION 1 — SINGLE PAYMENT PLAN. The entire amount is due on or before October 1, 2010. A 3% reduction in Tuition is offered to any Student paying in full by the due date, which discounted amount shall be \$_____. The discount will be forfeited if Tuition is not paid in full by the date set forth herein.

OPTION 2 — TWO PAYMENT PLAN. Tuition is paid in two installments. The first installment is due on or before October 1, 2010, and the second installment is due on or before February 1, 2011. A 1.5% reduction in Tuition is offered to any Student paying in full by the due date, which discounted amount shall be \$_____. The discount will be forfeited if Tuition is not paid in full by the date set forth herein.

OPTION 3 — MONTHLY PAYMENT PLAN Tuition is paid on monthly basis. Parents may sign an separate agreement if they pay in installments that are not equal monthly amounts.

OPTION 4- CUSTOM PAYMENT PLAN Tuition payment schedule will be agreed upon by parents and the principal and a separate page detailing the agreement will be attached to the contract.

Please Note: If you select Option 1 or Option 2 and payment is not made by the due date, Tuition payments must then be made through the monthly plan.

Tuition and/or other fees may be mailed to:

**St. Augustine School
67901 Howard
Richmond, MI 48062**

Or...placed in the basket in church (Clearly mark envelope "Tuition")

Or...brought to the school office.