



For Office Use Only

Date Received: _____

Received By: _____

Registration Form 2009-2010

Annual Registration Fee Schedule (Registration fee must be paid before space is reserved)

Montessori Students: \$65; Incoming Kindergarteners and New Students: \$200; Returning 1st-8th Grade Students: \$175.

Student's Legal Name (First, Middle, Last)	Date of Birth	Gender	Grade/Program Applying For
1.			
Religion: _____ If Catholic, has student been Baptized? _____; Received First Communion? _____ Montessori Class Options (please check): <input type="checkbox"/> Morning Class (8:00-11:00am) <input type="checkbox"/> Afternoon Class (12:00-3:00pm)			
2.			
Religion: _____ If Catholic, has student been Baptized? _____; Received First Communion? _____ Montessori Class Options (please check): <input type="checkbox"/> Morning Class (8:00-11:00am) <input type="checkbox"/> Afternoon Class (12:00-3:00pm)			
3.			
Religion: _____ If Catholic, has student been Baptized? _____; Received First Communion? _____ Montessori Class Options (please check): <input type="checkbox"/> Morning Class (8:00-11:00am) <input type="checkbox"/> Afternoon Class (12:00-3:00pm)			
4.			
Religion: _____ If Catholic, has student been Baptized? _____; Received First Communion? _____ Montessori Class Options (please check): <input type="checkbox"/> Morning Class (8:00-11:00am) <input type="checkbox"/> Afternoon Class (12:00-3:00pm)			
5.			
Religion: _____ If Catholic, has student been Baptized? _____; Received First Communion? _____ Montessori Class Options (please check): <input type="checkbox"/> Morning Class (8:00-11:00am) <input type="checkbox"/> Afternoon Class (12:00-3:00pm)			

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GUARDIAN 1 INFORMATION: (considered primary school contact)

Name _____ Relationship to Student _____
Marital Status: Married Divorced Remarried Separated Single Widowed
Home Address _____ City _____ State _____ Zip _____
Home Phone _____ Daytime Phone _____ Cell Phone _____
Employer _____ Occupation _____
Email _____ Language spoken at home _____

GUARDIAN 2 INFORMATION:

Name _____ Relationship to Student _____
Marital Status: Married Divorced Remarried Separated Single Widowed
Home Address _____ City _____ State _____ Zip _____
Home Phone _____ Daytime Phone _____ Cell Phone _____
Employer _____ Occupation _____
Email _____ Language spoken at home _____

EXTENDED CARE OPTIONS: (please check if your student will be attending)

- | | |
|--|--------------------|
| <input type="checkbox"/> After school until 4:00pm | \$110.00 per month |
| <input type="checkbox"/> After school until 5:30pm | \$190.00 per month |
| <input type="checkbox"/> Wednesdays Only | \$45.00 per month |
| <input type="checkbox"/> Early Release Days | \$15.00 per day |
| <input type="checkbox"/> Non-school Days | \$30.00 per day |
| <input type="checkbox"/> Drop-In Care | \$5.00 per hour |

ANNUAL TUITION RATES 2009-2010

Montessori Preschool (does NOT include Child Care)

Per Child \$2,472

Kindergarten-Eighth Grade

Parishioner

1 Child \$4,260
2 Children \$6,810
3 or more \$7,500

Non-Parishioner

1 Child \$4,740
2 Children \$8,630
3 or more \$9,800