



RE-REGISTRATION FORM 2018-2019

Please complete one form for each child you are registering for the 2018-2019 school year and enclose a non-refundable registration fee of \$200 per family. Registering by March 15, 2018 ensures that \$100 of the registration fee is applied toward next year's tuition. Registrations received after March 15th do not qualify for the tuition credit. Make checks payable to All Saints Catholic School and indicate "Registration Fee" on your check. Students are enrolled in the order indicated in the Student-Parent Handbook until the class is full. Additional students will be placed on a waiting list until space becomes available. The early re-enrollment incentive helps the All Saints School Board determine the operating budget for the upcoming year. This information is then used to determine class size and teacher assignments.

Name of Child: _____

Grade 2018-2019: _____ Re-register: Yes [] No []

Parent(s) Name: _____

Address: _____ City/Town: _____ Zip: _____

Email: _____ Phone: _____

Tuition Status (Check One)

Category A: _____ Catholic family registered and participating (through weekly envelope usage) at:
_____ St. Paul the Apostle Parish: ___ St. Gabriel's ___ St. John's ___ St. Joseph's
_____ St. Mary's ___ St. Matthew's ___ St. Teresa's
_____ Parish of the Resurrection of the Lord: ___ Holy Family ___ St. Ann's, Bradley
___ St. Anne's, Indian Island ___ Our Lady of Wisdom (Newman Center)
_____ Other Catholic Parish: _____
Parish Name Church Name/City

Category B: _____ Non Catholic family or non participating Catholic family (No Parish subsidy)

Category C: _____ Any family choosing to pay full tuition (No parish or school subsidy)

Child's Ethnicity (Check one) All Saints is responsible for reporting the following information in our annual reports.

_____ American Indian/Native Alaskan _____ Asian _____ Black _____ Hispanic
_____ Native Hawaiian/Pacific Islander _____ White _____ Multi Racial

Primary Language Spoken at Home _____ Secondary Language (if applicable) _____

For office use only

Date: _____ Check#: _____ Amount: _____ Cash Amount: _____ Initials _____