



ST. PATRICK CATHOLIC SCHOOL

2116 Lowry St., Lufkin, TX 75901-1316
936.634.6719 ♣ stpatricklufkin.com

For office Use only

Approved: ___ Yes ___ No

Application Fee \$ _____

Date Paid _____

___ Cash or Check # _____

Student Application for 2013-2014

Name of Student _____ Grade-Fall 2013 _____
First Middle Last

Parents Name _____

Address _____
Street City State ZIP

Phone _____ Cell Phone _____

Date of Birth _____ Place of Birth _____
City State County

Gender _____ Ethnicity _____ Religion _____

School Previously Attended _____

Public School in Residential Area _____

Primary Language Spoken in Home _____

Does the student have any special physical needs? ___ Yes ___ No

Does the student have any special emotional needs? ___ Yes ___ No

Does the student have any special academic needs? ___ Yes ___ No

Has the student ever been expelled? ___ Yes ___ No

Has the student ever skipped a grade? ___ Yes ___ No

Has the student ever repeated a grade? ___ Yes ___ No

If you answered yes to any of the previous questions, please attach specific information.

Parent Info:

FATHER

MOTHER

Name _____

Address _____

Home Phone _____

Cell Phone _____

Email Address _____

Employer _____

Work Phone _____

Religion _____

The student resides with: Both Parents ___ Mother ___ Father ___ Other ___

If other, please explain: _____

Name of Guardian _____

Relationship to Student _____

Address _____ Phone _____

Employer _____ Phone _____

Is your family registered with the St. Patrick Parish? ___ Yes ___ No

Principal Signature _____

Pastor's Signature _____

*(Required for all school families)

Is your family registered with another Catholic Parish? ___ Yes ___ No

Which Parish? _____

Principal Signature _____

Pastor's Signature _____

*(Required for new school families)

*Pastor's signature required for all Parishioner tuition rates.

Checklist of Documents and Information Required for Admission:

- ___ This Application, Signed and Completed
- ___ Registration Fee (Per family, non-refundable)
- ___ Baptismal Certificate (If Applicable)
- ___ Signed Tuition Contract
- ___ Signed Request for Previous School Records (If Applicable)
- ___ Birth Certificate
- ___ Immunization Records
- ___ Signed Volunteer Hours Contract
- ___ Completed Medical Information Form

I certify that the information on this application is accurate and complete; I acknowledge that any omission or inaccurate information could jeopardize my child's standing with St. Patrick Catholic School.

Signature of Parent/Guardian _____ Date _____

Print Name _____

St. Patrick Catholic School
Medical Information (1 per student)

Student _____ Grade _____
Address _____
Home Phone _____ Emergency Phone _____

Person(s) to call in case of emergency when parents cannot be reached:

Name _____ Relationship _____ Phone: _____
Name _____ Relationship _____ Phone: _____

Family Physician _____ Phone: _____
Dentist _____ Phone: _____
Hospital _____ Phone: _____
Insurance Co: _____ Group Name: _____
Group Number: _____ Individual Card No./Subscriber ID No. _____

Please list any health problems your child may have:

___ Allergies: food _____
 medication _____
 other _____
___ Asthma _____
___ Diabetes _____
___ Hearing _____
___ Kidney _____
___ Orthopedic _____
___ Seizure _____
___ Speech _____
___ Vision _____

Any other details or physical limitations regarding your child:

Parent/Guardian Signature _____ Date _____
Print Name _____

St. Patrick Catholic School

Monthly Tuition and Fees 2013 - 2014

PARISHIONER

	Monthly <u>Tuition & Fees</u>	Yearly <u>Tuition & Fees</u>
Pre-K 3 & Pre-K 4	\$375	\$3,750.00
K-8 (1st Student)	\$490	\$4,900.00
K-8 (2nd Student)	\$395	\$3,950.00
K-8 (3rd Student)	\$350	\$3,500.00
K-8 (4th Student)	\$200	\$2,000.00

NON-PARISHIONER

	Monthly <u>Tuition & Fees</u>	Yearly <u>Tuition & Fees</u>
Pre-K 3 & Pre-K 4	\$395	\$3,950.00
K-8 (1st Student)	\$575	\$5,750.00
K-8 (2nd Student)	\$480	\$4,800.00
K-8 (3rd Student)	\$420	\$4,200.00
K-8 (4th Student)	\$240	\$2,400.00

Notes on Tuition & Fees:

- Monthly tuition and fees are due on the 1st of the month and late **AFTER** the 10th of the month. Late payments are subject to a 10% late fee.
- A non-refundable registration fee of \$150 is due with your application, \$200 registration for families with more than one child.
- If a situation arises in which you will not be able to pay the agreed upon tuition and fees by the due date, please notify the principal of the situation as soon as possible. Our financial committee will review your request and notify you when your request is approved.

If you need a financial assistance application please come in to speak with the principal.

St. Patrick Catholic School
Tuition and Fees Contract
2013-2014

Thank you for choosing St. Patrick Catholic School and for your commitment to quality education for your child. The purpose of this document is to clarify your responsibility for the payment of tuition and fees for your child as the parent, guardian, or responsible party.

Students enrolled at St. Patrick's for 2013-2014:

Name	Grade
_____	_____
_____	_____
_____	_____

Total annual amount to be paid for by responsible party \$ _____

Payment Plan: (Please initial your choice)

- _____ In Full by the first day of school
- _____ Semester Payments (Total Divided by 2)
- _____ **10 Monthly Payments (August 1-May 1)**

The undersigned hereby accepts these terms and conditions for the enrollment of the designated student. In addition, it is clearly understood that:

1. Registration, book, maintenance, student and Kumon fees are non-refundable.
2. Tuition and fees are due to the school office by the 1st of each month. A 10% late fee will be assessed after the 10th.
3. Families are required to fulfill the entire year's contract. Families who desire to withdraw their student may petition the principal for negotiation of this contract in a cooperative, Christian manner.
4. The school has the right to require the withdrawal of the student(s) if tuition and fees are not paid on time.
5. The student will attend religion classes and will attend liturgies, prayer services, etc., as required.
6. The school has the right to require the withdrawal of a student if the school standards and conduct requirements of conduct, behavior, and academic achievement are not met by the student.
7. Twenty volunteer hours must be completed and logged during the school year. If not completed by the end of the school year, hours must be paid at \$10/hour.
8. In the event medical attention is required, the school will use its best efforts to follow the steps indicated on the student emergency card.

BY SIGNING THIS CONTRACT, I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND MY FINANCIAL OBLIGATIONS TO ST. PATRICK CATHOLIC SCHOOL AND AGREE TO PAY ALL TUITION AND FEES AS SET FORTH IN THIS CONTRACT.

Print Name of Person Financially Responsible for Tuition: _____

Signature of Person Financially Responsible for Tuition: _____

Date: _____

St. Patrick Catholic School
Volunteer Hours Contract
2013-2014

Family of _____

Each family enrolled in St. Patrick Catholic School is required to complete 20 volunteer hours for the benefit of the school community throughout the course of the year.

Our school works because everyone pitches in to make it a better place!

Opportunities for volunteers will be posted in the weekly newsletter, at school functions such as open house, in the office, and/or on the web site.

Examples of volunteer hours:

Chaperoning field trips	Work days
Kumon grader	Assisting teacher (copies, parties, etc.)
Helping with Golf Tournament	Helping with Fall Festival
Annual Gala	Field Day
Class parties	School Maintenance and Cleaning

The following will NOT count toward volunteer hours:

- Assisting only your own child during Kumon

(Although we encourage your participation and presence regarding your child's education at any time, this will not count toward logged volunteer hours.)

- Any volunteer hours that are not completed by the end of the year are to be paid to the school at a rate of \$10 per hour. Families registering after the school year begins are subject to a prorated number of hours depending on the start date.

BY SIGNING HERE, YOUR FAMILY AGREES TO PROVIDE 20 HOURS OF VOLUNTEER SERVICE DURING THE 2013-2014 SCHOOL YEAR FOR THE BENEFIT OF ST. PATRICK CATHOLIC SCHOOL.

Parent/Guardian Name _____ Date _____
Print Name _____

St. Patrick Catholic School
Consent to Photograph Form
2013-2014

Consent to Photograph

Photograph/Video Release

The undersigned does hereby authorize St. Patrick Catholic School employees, or other persons under the direction of St. Patrick Catholic School employees, to photograph/film and/or release information while under the care of the above institution. The undersigned also agrees to the use of the negatives, prints or films prepared for newspaper, brochure, television, yearbook or other forms of publication. The undersigned hereby and forever waives all rights that they may have to any claims for payment or royalties whether the exhibition and showing is under philanthropic, commercial, institutional, or private sponsorship, and irrespective of whether a fee of admission or film rental is charged. The undersigned further agrees to hold St. Patrick Catholic School and its employees free and harmless from any and all liabilities, which might arise from the publication of such photographs or information.

Name of Student(s)

Signature of Parent or Guardian _____ Date _____

Print Name _____

St. Patrick Catholic School
2013-2014

Information for School Directory

Student name	Date of Birth	Grade
_____	_____	___
_____	_____	___
_____	_____	___
_____	_____	___

Parent/Guardian _____ Email _____
Address _____
Home Phone _____ Cell Phone _____
Work Phone _____

The information provided above is for use by the St. Patrick Catholic School community for school related purposes only. By providing directory information you understand that your information will automatically be included in the directory, unless you specify otherwise.

Are you interested in

Please check any activities you would be interested in participating in:

- | | |
|--|--|
| <input type="checkbox"/> PTO | <input type="checkbox"/> Work days |
| <input type="checkbox"/> School Advisory Council | <input type="checkbox"/> Assisting teacher (copies, parties, etc.) |
| <input type="checkbox"/> Helping with Annual Gala | <input type="checkbox"/> Helping with Fall Festival |
| <input type="checkbox"/> Helping with the Spring Golf Tournament | <input type="checkbox"/> Field Day |
| <input type="checkbox"/> Chaperoning field trips | <input type="checkbox"/> Kumon grader |
| <input type="checkbox"/> Room parent | <input type="checkbox"/> Class parties |

Please list any special talents or skills you feel would benefit St. Patrick Catholic School:

St. Patrick Catholic School
2013-2014

Family Referral Bonus!

Spreading the good news about St. Patrick School will now pay off in 2013-2014. Any currently enrolled family who registers for next year and refers a new family to St. Patrick Catholic School is subject to a referral bonus!

Here is how it works:

1. Register your children for 2013-2014.
2. Remain current on all tuition and fees.
3. Refer a new family and fill out a referral bonus form. Give it to the principal.
4. If the new family registers and remains at St. Patrick's through November 2013 (including being current on all tuition and fees), you and the new family will each receive a \$100 school credit in December).
5. The credit can be used against December tuition, and extended-care. Other redemption opportunities may be added at the discretion of the principal and parish priest.
6. It has no cash value and is non-transferable.

Thanks for helping to spread the word!

God is Good...All the Time!