

## 2008-2009 Holy Family School Re-registration Form

**Re-registration is not complete without a \$100.00 per student re-registration fee (non refundable). After March 1, 2008 re-registration fee will be \$125.00.**

As part of the registration process, a \$100.00 fee is due on June 1<sup>st</sup> to cover Science, technology and other incidentals.

**Tuition Policy Statement:**

1. Monthly tuition payments are due the first of each month beginning July 1, through May 1.
2. Payments received after the 5th of the month are considered late and are subject to a 10% late fee
3. Parents whose account is over thirty (30) days delinquent without making individual arrangements for timely payment will not be permitted to return their children to school.

Please type or print all information:

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Employed By: \_\_\_\_\_

Employed By: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

e-mail address: \_\_\_\_\_

e-mail address: \_\_\_\_\_

**Your child(ren) are zoned for what public school?** \_\_\_\_\_

**Custodial Parent:** mother father both grandparent other (specify) \_\_\_\_\_  
 (circle answer) **If the answer is other than both parents, custodial papers must be on file in the school office.**

Registered Member of: St. Joseph \_\_\_\_\_ Visitation \_\_\_\_\_ Queen \_\_\_\_\_ Other \_\_\_\_\_  
 (Church/Parish) (please specify)

**List by grades from highest to lowest  
 2008-2009 School Year**

\_\_\_\_\_  
 Name Social Security Number Date of Birth Grade

\_\_\_\_\_  
 Name Social Security Number Date of Birth Grade

\_\_\_\_\_  
 Name Social Security Number Date of Birth Grade

\_\_\_\_\_  
 Name Social Security Number Date of Birth Grade

.....  
 Office Use Only

\_\_\_\_\_  
 Fee Received

\_\_\_\_\_  
 Cash

\_\_\_\_\_  
 Check

\_\_\_\_\_  
 Date

**\*\*OVER (Please Complete)\*\***

**IMPORTANT!! PLEASE READ AND SIGN WHERE APPLICABLE**

I hereby grant authority to Holy Family School for the use of any videotape, photographs, or similar items in which my child(ren) might appear or statements made by them in the production, display of, sale of, public service or promotional announcements as well as corporate sponsored activities.

Parents/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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There are no changes in custody arrangements for my child(ren) for the next school year. If changes occur, I will notify the School Office and supply them with a copy of the appropriate changes.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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In the event that Holy Family School makes available a School Directory for the 2008-2009 School Year, my name, address and home phone number may be published.

Family Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Do you have a special talent you are willing to share with Holy Family School? Example: painting, carpentry, electrical, etc.

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