

**ST. CHRISTOPHER SCHOOL NEW REGISTRATION
2018 – 2019 SCHOOL YEAR**

Kindergarten Registration Information

Registration for all **new students in kindergarten** will begin on **March 1, 2018**.

If you are registering a child for **kindergarten**, you will need to bring **copies of your child's birth certificate, immunization record and baptismal certificate (if applicable)**. Other needed items if it applies to your child, are copies of a **service plan** (ex. 504, IEP, speech, etc.) and up to date copies of any **custody papers**. Your child must be **five years** old by **August 1, 2018** in order to register. Registration materials for new kindergarten students must be accompanied by a **\$150.00 non-refundable registration fee**. The fee covers the cost of the Religion textbooks and other consumable supplies used throughout the year.

Completed registration forms, registration fee and required documents can be dropped off at the school office between **8:00 a.m. and 3:00 p.m.**

“Everything you always wanted to know about St. Chris Pre School and Kindergarten”

An informational **orientation meeting for parents** of all **incoming Kindergarten students** will be **Tuesday, April 24, 2018 at 6:30 p.m. in the school cafeteria**. Our Junior High students will provide free childcare for preschoolers. Mrs. Judy (Shoup) and Mrs. Chiappone will hand out necessary paperwork, including **Kindergarten screening sign-up** and **transportation sign-up**. They will also answer any and all questions you may have regarding our Pre School, Kindergarten and Child Care Center.

Kindergarten screening for all incoming students will be held **Friday, April 27, 2018 in the church** starting at approximately **9:00 a.m.** Be sure to **mark you calendar** for both these very important dates.

Acceptance into the St. Christopher Kindergarten Program is determined by the **child's readiness**, which is **based on age and screening results**.

If you have any questions about registration, the screening process, or about the school in general, please call 898-5104. Tours of the school can also be arranged by calling the school office.

New Kindergarten Student Registration Checklist

Student Name _____ Registration Date _____

Do you have the following before handing in Registration ?

Registration Forms _____

Discipline Disclosure _____

Tuition Payment Form _____

Registration Fee _____
(\$150 non-refundable/child)

Birth Certificate _____
(per child)

Immunization Records _____

Baptismal Certificate _____
(if applicable)

Custody Papers _____
(if applicable)

Service Plans (ex. IEP,504,speech) _____
(if applicable)

For Office Use:

Enter in Option C _____

Enter in all classes _____

Add tuition in Option C _____

Information to: Cafeteria _____, Library _____, Computer _____, A/R _____

Permanent Record Card _____ File _____

Add to One Call Now _____

Student Name: _____

Kindergarten student questionnaire:

Please answer the following questions about your child, check all that apply.

_____ My child had behavior issues at school.
If yes, please list the issues. _____

_____ My child has been asked to leave school for behavior problems.
If yes, please list the behavior. _____

_____ My child has educational needs you should know about.
If yes, please list the issues. _____

_____ My child has other issues you should know about.
If yes, please explain _____

Please list the last three schools your child attended with a contact name and phone number.

School Name & contact name _____ Ph# _____

School Name & contact name _____ Ph# _____

School Name & contact name _____ Ph# _____

Parent/Guardian Signature: _____ Date: _____

Failure to disclose any behavior problems may result in immediate dismissal from St. Christopher School.



Please Print with Blue or Black Ink

Date _____

Section I: Family Information

Family Name _____
Street _____ City/State/Zip _____
Home Phone _____ Home E-mail _____

Section II: Parental/Guardian Information

Father Name _____ Father ___ Stepfather ___ Guardian ___ Deceased ___
Employer _____ Occupation _____
E-mail Address _____ Cell Phone # _____
Work Address _____ City/State/ Zip _____
Work Phone# _____
Religion _____ St. Christopher Parishioner? Y ___ N ___ Since 19 ___/20 ___
Marital Status _____ Father's Place of Birth City/State _____
Father's address (if different from above) _____
City/State/Zip _____ Home Phone _____

Mother Name _____ Mother ___ Stepmother ___ Guardian ___ Deceased ___
Employer _____ Occupation _____
E-mail Address _____ Cell Phone # _____
Work Address _____ City/State/ Zip _____
Work Phone # _____ Mother's Place of Birth City/State _____
Religion _____ St. Christopher Parishioner? Y ___ N ___ Since 19 ___/20 ___
Marital Status _____ Maiden Name _____
Mother's address (if different from above) _____
City/State/Zip _____ Home Phone _____

Section III: Student Information

Provide information for each child registering at St. Christopher School for the 2015-16 school year.

Student # 1: Last Name _____ First _____ Middle _____
Street Address _____ City/State/Zip _____
(If different than above)
Entering Grade: Kindergarten, First, Second, Third, Fourth, Fifth, Sixth, Seventh, Eighth
Male / Female Birth Date: Month _____ Day _____ Year _____
City/State of Birth _____, _____
Public School District of Residence _____ (Must Complete - Required by State)
Public School Building _____ (Must Complete - Required by State)
Religion _____ Child's Race _____ (Must Complete - Required by State)
Baptism: Full Date ___/___/___ Church _____ City/State _____
Reconciliation: Full Date ___/___/___ Church _____ City/State _____
1st Communion Full Date ___/___/___ Church _____ City/State _____
Confirmation Full Date ___/___/___ Church _____ City/State _____

Student # 2: Last Name _____ First _____ Middle _____

Entering Grade: Kindergarten, First, Second, Third, Fourth, Fifth, Sixth, Seventh, Eighth

Male / Female Birth Date: Month _____ Day _____ Year _____

City/State of Birth _____, _____

Public School District of Residence _____ (Must Complete - Required by State)

Public School Building _____ (Must Complete - Required by State)

Religion _____ Child's Race _____ (Must Complete - Required by State)

Baptism: Full Date ___/___/___ Church _____ City/State _____

Reconciliation: Full Date ___/___/___ Church _____ City/State _____

1st Communion Full Date ___/___/___ Church _____ City/State _____

Confirmation Full Date ___/___/___ Church _____ City/State _____

Student # 3: Last Name _____ First _____ Middle _____

Street Address _____ City/State/Zip _____

(If different than above)

Entering Grade: Kindergarten, First, Second, Third, Fourth, Fifth, Sixth, Seventh, Eighth

Male / Female Birth Date: Month _____ Day _____ Year _____

City/State of Birth _____, _____

Public School District of Residence _____ (Must Complete - Required by State)

Public School Building _____ (Must Complete - Required by State)

Religion _____ Child's Race _____ (Must Complete - Required by State)

Baptism: Full Date ___/___/___ Church _____ City/State _____

Reconciliation: Full Date ___/___/___ Church _____ City/State _____

1st Communion Full Date ___/___/___ Church _____ City/State _____

Confirmation Full Date ___/___/___ Church _____ City/State _____

Student # 4: Last Name _____ First _____ Middle _____

Street Address _____ City/State/Zip _____

(If different than above)

Entering Grade: Kindergarten, First, Second, Third, Fourth, Fifth, Sixth, Seventh, Eighth

Male / Female Birth Date: Month _____ Day _____ Year _____

City/State of Birth _____, _____

Public School District of Residence _____ (Must Complete - Required by State)

Public School Building _____ (Must Complete - Required by State)

Religion _____ Child's Race _____ (Must Complete - Required by State)

Baptism: Full Date ___/___/___ Church _____ City/State _____

Reconciliation: Full Date ___/___/___ Church _____ City/State _____

1st Communion Full Date ___/___/___ Church _____ City/State _____

Confirmation Full Date ___/___/___ Church _____ City/State _____

2018-2019 Tuition Information Form

Please Print with Black or Blue Ink

Date _____

Family Name _____

Is your family registered at St. Christopher Parish? Yes _____ No _____

If so, are you an active member of St. Christopher Parish? Yes _____ No _____

Date Registered _____

If not a member of St. Christopher Parish and are a member somewhere else, where are you a member? _____

We would like to pay 2018-2019 tuition:

_____ 12 Monthly Payments – Beginning June 1, 2018 and ending May 1, 2019

_____ 9 Monthly Payments – Beginning September 1, 2018 and ending May 1, 2019

_____ 1 Annual Payment – Due September 1, 2018

Note: Tuition needs to be paid in full by the end of the school year in order to receive the end of year report card, for records to be forwarded to next school, or to be able to register for the next school year.

Signature _____ Date _____

KEEP FOR YOUR RECORDS

2018 - 2019 Tuition Schedule

Parish Member	1 Annual Payment (Due 9/1/18)	9 Monthly Payments (9/1/18 - 5/1/19) (due each month)	12 monthly Payments (6/1/18 - 5/1/19) (due each month)
1 Child	\$3,375.00	\$375.00	\$281.25
2 Children	\$6,580.00	\$731.11	\$548.33
3 Children	\$9,625.00	\$1,069.44	\$802.08

Non-Parish Member	1 Annual Payment (Due 9/1/16)	9 Monthly Payments (9/1/16 - 5/1/17) (due each month)	12 monthly Payments (6/1/16 - 5/1/17) (due each month)
Per Child	\$5,000.00	\$555.55	\$416.66

ALL PAYMENTS ARE DUE ON THE FIRST OF THE MONTH

Ways to make payments:

During school year, **send in with student** in an envelope marked school office

Other options:

Send to the school address: St. Christopher School

405 E. National Rd.
Vandalia, Ohio 45377
Attn: School Office

Bring it to the **school office**. If not in, can drop off at **parish office** and they will put in our mail box.

Send an **electronic bank check** to the school.

Use the **Online Tuition Payment Option** located on the school website (school.stchristopheronline.com)

Click on "Tuition" next to the Tuition chalkboard icon and scroll to the bottom of the page

KEEP FOR YOUR RECORDS