

# Saint Joseph Catholic Montessori School

## 2021-2022 Registration Form

### Parent/Guardian Information

Father/Guardian \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Cell Provider \_\_\_\_\_  
 Employer/Position \_\_\_\_\_ Work # \_\_\_\_\_  
 Religion \_\_\_\_\_ Parish \_\_\_\_\_

Mother/Guardian \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Cell Provider \_\_\_\_\_  
 Employer/Position \_\_\_\_\_ Work # \_\_\_\_\_  
 Religion \_\_\_\_\_ Parish \_\_\_\_\_

Primary Family Phone # \_\_\_\_\_ Primary Family Email \_\_\_\_\_

### Program & Tuition Information

#	Program	Annual payment	Monthly over 9 months	Monthly over 12 months
1	Children's House (full day)	\$5988	\$665.33	\$499
2	Children's House (half day)	\$3780	\$420	\$315
3	Children's House (Kindergarten)	\$3780	\$420	\$315
4	Lower Elementary (grades 1-3)	\$3780	\$420	\$315
5	Upper Elementary (grades 4-6)	\$3780	\$420	\$315
6	Before school care	-----NA-----	\$84	-----NA-----
7	After school care	-----NA-----	\$166	-----NA-----

**\*A non-refundable \$175 Annual Enrollment Fee (per student) is DUE with this registration form.**

\*An additional \$75 supply fee (per student) will be added to your first month's payment.

\*Lunches will be charged separately.

\*Children signing up for Children's House must be fully toilet trained.

### Student Information

Name \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ M/F \_\_\_\_\_ Program # \_\_\_\_\_

Race (please check all that apply)

American Indian/Alaskan Native

White

Black/African

Hispanic/Latino

Asian

Native Hawaiian/Pacific Islander

Name \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ M/F \_\_\_\_\_ Program # \_\_\_\_\_

Race/s (if not same as above) \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ M/F \_\_\_\_\_ Program # \_\_\_\_\_

Race/s (if not same as above) \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ M/F \_\_\_\_\_ Program # \_\_\_\_\_

Race/s (if not same as above) \_\_\_\_\_

**Please select one of the following options:**

- I will PAY IN FULL by August 1, 2021; scheduled through FACTS or by check, payable to St. Joseph Catholic Montessori School.
- I will make monthly payments through a FACTS Tuition Payment Plan for 9 months.
- I will make monthly payments through a FACTS Tuition Payment Plan for 12 months.

**Tuition Assistance**

Tuition Assistance is available. Please contact St. Joseph school office at 701-663-9563 with any questions regarding Tuition Assistance.

**Multiple Child Discount**

We offer a multiple child discount of \$300 for each additional child after the eldest child.

Please list any students enrolled.

Name _____	DOB ____/____/____	School _____
Name _____	DOB ____/____/____	School _____
Name _____	DOB ____/____/____	School _____
Name _____	DOB ____/____/____	School _____
Name _____	DOB ____/____/____	School _____

**Payment Terms & Agreement**

This Tuition & Fees Agreement is a legal contract with St. Joseph Catholic Montessori School that **must be signed by ONE** Responsible Party upon enrollment. The Responsible Party is the person that receives the monthly billing statement and the one that is required to make payments. If a person other than the Responsible Party (ex-spouse, grandparent, or other unrelated individual or entity) desires to also assume financial responsibility, he or she must sign a **separate** Tuition & Fees Agreement and remit payments according to the agreed-upon schedule. If only one form is submitted, the full tuition balance will be applied to the account of the Responsible Party. Failure to make payments may result in referral of your account to a collection agency.

There is a 90-day probationary period for all students, during which St. Joseph Catholic Montessori School will assess the student's ability to perform adequately in this environment. If the student is deemed unable to perform adequately, St. Joseph Catholic Montessori School reserves the right to require a change in a student's program or dismiss the student at any point within the 90-day probationary period. Any prepaid tuition will be pro-rated and refunded.

**My signature below indicates that I have read and understand the terms of this agreement and my financial obligation to St. Joseph Catholic Montessori School.**

\_\_\_\_\_

**Responsible Party – Parent/Legal Guardian Signature**

\_\_\_\_\_

**Date**

- I have included my non-refundable **\$175 Annual Enrollment Fee (per student)**

\*If you decide not to send your child to *St. Joseph Catholic Montessori School* before the school year begins, you will not be obligated to pay tuition.

**For office use only**

Total Family Tuition Amount = \_\_\_\_\_

Multiple Child Discount (\$300 after the eldest) = \_\_\_\_\_

Financial Aid = \_\_\_\_\_

Tuition Payment Plan Total = \_\_\_\_\_

Enrollment Fees paid in full \_\_\_\_ yes \_\_\_\_ no