ENROLLMENT INFORMATION

for the

2022-2023 Academic School Year

Please read all of the information contained within this packet.
Dear LMC community:

As the Canonical Pastor of our Lake Michigan Catholic School, I am delighted to provide this word of welcome.

Since I arrived as leader of our school system, I have been immensely impressed by the dedication of our administration, staff, teachers and students. Over and over again, people introduce themselves to me as “my name is… and I am a graduate of our school!” That says a lot when a person identifies themselves along with their name. That shows how much passion our alumni have for the future success of our school.

And now, you have the opportunity to be part of over 100 years of history. We are more than just a school… we are a community. Many alumni and students call themselves “a family.” That alone says a lot. Sometimes we refer to ourselves as the Lake Michigan Catholic Schools. But I like to use the singular “school” because we are all one community.

During the challenge of COVID, our teachers and staff rose to the occasion. When the pandemic began, and schools around us closed, we were already prepared to begin virtual learning. While many schools had to get prepared once their schools closed, we hit the ground running.

Make no mistake about it… while I hold the title of Canonical Pastor and we have two principals who administer our school, our true leader is Jesus Christ, Risen from the dead. While this has always been the case, you will find that more visible as we move forward.

The 2022-2023 school year will be transformational. It will be a year that people will talk about and remember. I hope you will be a part of it. While it’s true that it is a sacrifice for families to send their students to our school, I like to think of it as an investment. Families are investing in a quality, faith-filled education. We are not preparing our students to be ready for the world, we are preparing our students to change the world. There cannot be a price tag on that.

So, thank you for entrusting your students to us. May the good work the Lord is doing here be brought to fulfillment.

Praised be Jesus Christ!

Fr. John D. Fleckenstein, Canonical Pastor
Thank you for your consideration to enroll your children at Lake Michigan Catholic Schools! We recognize that you want the best for your children, and we believe LMC is the best. The Catholic Community Education Commission (CCEC) works with school administrators and our Canonical Pastor, Father John Fleckenstein, to ensure we are relentlessly committed to our Mission, Vision, and Values.

We are dedicated to having the right resources focused in the right areas generating the right results, so that our students, faculty, and staff can perform at their best. We do this through soliciting continuous feedback, understanding priorities, and performing strategic planning for the short-term, medium-term, and long-term periods. Using this formula, we ensure an aligned purpose and continuous improvement of our schools.

Thank you again for your consideration. We are doing great things at LMC, and I hope your family will be a part of it!

Kimberli Siglow
CCEC President, Lake Michigan Catholic Schools
Dear Lakers,

Welcome to Lake Michigan Catholic School where we educate students in grades pre-K-12. Rooted in a long standing Catholic tradition of educating students in morality, citizenship and high academic expectations and achievement, our goal is to offer our families an exceptional Catholic school experience. We embrace our Catholic traditions with a heartfelt passion for Jesus Christ and his teachings. We continually strive to be innovative and progressive in our teaching and learning.

Our teaching staff is 100% certified by the State of Michigan. Over 95% of our educators are Catholic. Our school is accredited by the State of Michigan and we are a member of the National Catholic Education Association and the Michigan Association of Non-Public Schools. Our students are exemplary, participating in community service, posting annual graduation and college acceptance rates above 95% and earning millions in scholarship support. Our students change and positively impact the lives of our parishes, local communities and beyond.

Daily prayer, weekly Mass, devotions, Confirmation preparation and the presence of Jesus in all of our lives permeates our decisions, actions, curricula and life on campus. As we enter fall 2022, international partnerships with schools in Guatemala, China, Spain, Germany and France will open the doors of opportunity for cultural immersions, study abroad and exchange experiences. Our ZSpace mixed reality technology will be implemented in grades 6-12 science classes, AP psychology, and a variety of additional content areas. Our Global Training and Finance Lab will be the setting for our ever increasing business curriculum. Our World Language program will welcome the addition of introducing all students to the Latin Language. Our job as educators at LMC is to invite and engage students in all life and afterlife has to offer. We want to challenge our students, and at times, make them uncomfortable, so that they may truly grow in their personal relationships with God, family and those they come in contact with daily.

Our school’s teacher to student ratio of 1:12 and classes averaging below 15 students, allows for an unprecedented learning experience in an environment that fosters positive student, teacher and parent relationships. Jesus Christ is the reason for our school and it is his teachings and our support of students’ moral, civic, and educational development that offers our students a unique, personal and Catholic school experience second to none.

It's a Great Time To Be A Laker!

James White, M.Ed.

Principal
Lake Michigan Catholic School
Dear Families-

It has been a blessing to be a part of Lake Michigan Catholic Elementary School. We believe we are developing students to become not only lifelong learners but everyday problem solvers. Through a variety of programs, we are reaching more students not only to help those in need of additional support but also to enrich those who need more rigor. Our teachers are passionate educators who strive to reach each child where they are and push them to reach their full potential. It is our goal when students leave our building that they are ready not only academically but also to know compassion, kindness, and service to others.

Here are a few initiatives we had started the past couple of school years. All students are 1-1 with new Chromebooks. We replaced dated Chromebooks with newer models that allow for quicker access to materials and longer battery life. The Elementary School continues to evolve the position of our Resource Teachers. This continues to provide support to teachers with students who need added attention. They also provided teachers with a means to get a more in-depth assessment. They’ve also created small groups for students outside the Tier 1 and Tier 2 setting. The position also provided a resource for new and incoming students to be tested and placed in the correct learning environment. The Resource Teacher brought in additional support from Berrien RESA, which continues to provide PD for the Resource Teacher and faculty.

We continue to add more components to our STREAM Lab. This allows students and teachers to explore more STREAM activities. Teachers had already done this in the classroom, but this space continues to provide a room with all the materials and activities. Students continued to learn problem-solving skills in an environment more suited for STREAM and Maker activities.

We look forward to continuing our work with your children at Lake Michigan Catholic Elementary School. We have a lot of exciting opportunities for our students and hope you and your children will join our Lake Michigan Catholic Community. Please let me know if you have any questions.

Blessings,

Mr. Larry Hoskins
Principal, Lake Michigan Catholic Elementary School
Dear Laker Families,

Catholic Schools Week is that time of year when we open enrollment for the next school year. We are happy to announce that enrollment for the 2022-2023 Academic School Year will commence on **Saturday, February 5, 2022**. Please watch for the email announcing that you can now enroll your child. The email will go out to whoever is the enrollment responsible parent in RenWeb. Normally, this is the parent who enrolled the student last year.

Please take time to read through this "Enrollment Information Packet" as there are announcements from Fr. John Fleckenstein, Canonical Pastor of Lake Michigan Catholic Schools, Kim Siglow our CCEC President, Larry Hoskins our Elementary Principal, and James White our Middle/High School Principal. Included is information about some of the great improvements made this year and more for the upcoming year. This document also includes the 2022-2023 Tuition Fee Schedule, Financial Assistance Application Form, Volunteer Form, several informational documents, and all of the forms required to enroll your child.

Please refer to the Tuition Fee Schedule as we have not increased the tuition rates from last year.

Please note the following:

- No Registration Fee.
- You will receive a Transitional Grant of $500 per student for students transitioning from Preschool/TK to Kindergarten, 5th to 6th Grade, or 8th to 9th Grade.
- Please complete the enrollment process by March 15, 2022 to avoid the late enrollment fee of $200.
- Financial Assistance is available for those who qualify. Funds are limited and will be awarded on a first come first serve basis, so apply as soon as possible. Financial Assistance Applications are due by May 1, 2022.

Thank you in advance for enrolling your children at Lake Michigan Catholic Schools for the 2022-2023 Academic School Year.

If you need assistance or have any questions, please contact me as I’m always happy to help.

(Please remember to click on the submit button on the last page of the online enrollment packet for each of your children by 3/15/2022 so your enrollment is recorded on time.)

Thank you and God Bless,

Larry Glendening

DIRECTOR OF BUSINESS OPERATIONS
lglendening@lmclakers.org
Dear Friends,

Please join us for National Catholic Schools Week, our annual celebration of what makes education at Lake Michigan Catholic outstanding. Starting with Sunday Mass on January 30, we have a whole week of activities planned to show what our students are accomplishing and to celebrate the community we have built to educate tomorrow's citizens and church leaders. The theme of our celebration is “Catholic Schools: Faith. Excellence. Service.” Catholic schools have a specific purpose to form students to be good citizens of the world, love God and neighbor and enrich society with the leaven of the gospel and by example of faith. Not only are we teaching students to become future servant leaders, faith-filled disciples and enriched citizens in our communities, educators are growing with them. We are all learners, servants and leaders. These shared qualities are what make our schools work. They are what make Lake Michigan Catholic succeed. The theme also focuses on key elements of Catholic education: faith development, academic excellence and dedication to service. These elements set our school apart from other educational options. They are why families make sacrifices to provide their children with a Catholic education. We are grateful every day for the teachers, staff, board members, parents and volunteers who make our school a success. National Catholic Schools Week is a good time for all of us to thank them for their dedication and service.

Devotedly yours in Christ,
Rev. John Fleckenstein
Rev. James Adams
Rev. Arul Lazar
Mr. James White
Mr. Larry Hoskins
Mr. Larry Glendening

Let’s Celebrate Our Blessings Together!
Join us for Mass

Sunday, January 30th
8:00am, 10:00am, 12:00pm
St. Joseph Catholic Church
(downtown)
Sunday, February 6th
9:00am
St. Joseph Catholic Church
(South)

Lord, continue to bless our Catholic schools. Help them to be a source of wisdom, love, & peace. May all who enter their classrooms be filled with the wisdom of the Holy Spirit. May Catholic education grow so your good news can be taught to children around the world. Amen

Nourishing the Human Spirit~Mind, Body, and Soul~through Jesus Christ
JOIN US IN SUPPORTING OUR COMMUNITY

LMC K-12 students will collect items for Catholic Community Center. They have requested chicken noodle soup, canned chili, canned spinach and ramen noodles. Please donate all items to LMC Offices by Friday, February 4th.

SPECIAL EVENTS DURING CATHOLIC SCHOOLS WEEK

Sunday, January 30–Celebrating Our Parishes & Schools ➤ 8:00am, 10:00am, 12:00pm Sunday Masses at St. Joseph Catholic Church downtown; Speaker, Fr. John Fleckenstein. Students attending Mass should wear school uniforms in support of Catholic Education ➤ Thank you to parish, donors, alumni and Laker supporters

Monday, January 31–Celebrating Our Communities ➤ Join LMC students in collecting items (listed above) for the Catholic Community Center-week-long ➤ Goodies from LMC will be delivered to parish offices, city hall, police, and fire departments in our local civic communities ➤ Grades 6-12, Spirit Day (non-uniform)

Tuesday, February 1–Celebrating Our Students ➤ Remember LMC on the NATIONAL CATHOLIC GIVING DAY - Many Gifts, One Nation: A day to give to Catholic Schools - online giving at http://lmcaadvancement.org ➤ Grades 6-12 Ice Skating ➤ Grades 6-12, Spirit Day (non-uniform) ➤ Grades 6-12 student appreciation lunch ➤ No homework for grades k-5

Wednesday, February 2–Celebrating Our Nation ➤ Veteran service collection ➤ Heart Heroes at LMC Elementary School ➤ “Wizard of Oz” puppet show at LMCES at 12:30pm & 1:30pm ➤ Grades 6-12 Red/White/Blue dress ➤ Grades 6-12 letter writing to veterans

Thursday, February 3–Celebrating Our Vocations ➤ Various Clergy invited to speak on vocations ➤ Thank you(s) written by ES students to our vocational people ➤ Student Appreciation - Treat for All LMC Students ➤ Grades 6-12 Spirit Day (non-uniform)

Friday, February 4–Celebrating Our Faculty, Staff & Volunteers ➤ Spirit Day for all LMC students & staff ➤ All Teacher/Staff appreciation lunch ➤ Fr. John visiting LMC Elementary School ➤ Student letters written to our faculty, staff and volunteers

Saturday, February 5–Celebrating Families ➤ Sarett Nature Center: Hiking, Cross-Country Skiing, Snowshoeing-discount for the day-separate flyer sent home

Sunday, February 6–Celebrating Our Parishes & Schools ➤ 9:00am Sunday Mass at St. Joseph Catholic Church South; Speaker, Fr. John Fleckenstein. Students attending Mass should wear school uniforms in support of Catholic Education

YOU CAN LEND A HAND

“You Can Lend a Hand” fundraising event for LMC Schools.

LMC Students will be selling coupons this year. The coupon price is $1 each, with sales starting February 1st. Each coupon is valid for a free Croissan’wich or Original Chicken Sandwich at Burger King®, or free Chips & Salsa at Chili’s®, or free Bruschetta Appetizer at Papa Vino’s®.

If you have any questions, feel free to contact the Business Office at 269-983-5529.

Proceeds go directly to Lake Michigan Catholic Schools.

facebook.com/LMCSchools • www.lmwls.org • (269) 983-2511 MS/HS • (269) 429-0227 ES
Lake Michigan Catholic Schools
Tuition Fee Schedule
2022-2023 School Year

Current Families: Enroll by March 15th, 2022
To avoid Late Enrollment Fee of $200

<table>
<thead>
<tr>
<th>Standard Tuition</th>
<th>Catholic Parishioner Grant</th>
<th>Tuition with Catholic Parishioner Grant Applied</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Day Preschool</td>
<td>($ 1000)</td>
<td>$ 2750</td>
</tr>
<tr>
<td>$ 3750</td>
<td>($ 1500)</td>
<td></td>
</tr>
<tr>
<td>5 Day Preschool</td>
<td>($ 2200)</td>
<td></td>
</tr>
<tr>
<td>$ 5250</td>
<td>($ 2200)</td>
<td></td>
</tr>
<tr>
<td>Transitional Kindergarten</td>
<td>$ 7650</td>
<td>($ 1950)</td>
</tr>
<tr>
<td>$ 7650</td>
<td>($ 2200)</td>
<td></td>
</tr>
<tr>
<td>Elementary (Grades K-5)</td>
<td>$ 7650</td>
<td>($ 1750)</td>
</tr>
<tr>
<td>$ 7650</td>
<td>($ 2200)</td>
<td></td>
</tr>
<tr>
<td>Middle School (Grades 6-8)</td>
<td>$ 8100</td>
<td></td>
</tr>
<tr>
<td>$ 8100</td>
<td>($ 2200)</td>
<td></td>
</tr>
<tr>
<td>High School (Grades 9-12)</td>
<td>$ 8800</td>
<td></td>
</tr>
<tr>
<td>$ 8800</td>
<td>($ 1750)</td>
<td></td>
</tr>
</tbody>
</table>

3 Day Preschool $3750, 5 Day Preschool $5250, Transitional Kindergarten $7650, Elementary (Grades K-5) $7650, Middle School (Grades 6-8) $8100, High School (Grades 9-12) $8800

For current families: Applied to tuition if online enrollment packet is submitted by 3/15/2022

Costs above are per student: includes book, technology, retreat, transportation and athletic fees. Tuition is non-refundable unless you qualify based on our Tuition Refund Policy. In that case, your enrollment withdrawal fee of $200 per student up to a maximum of $600 per family will be assessed.

FINANCIAL ASSISTANCE IS AVAILABLE
LMC offers a simple and discreet process. Contact Larry Glendening at 269-983-5529 or lglendening@lmclakers.org

To be eligible, families must have a K-12 student enrolled at LMC. Preschool students are eligible only if a K-12 sibling is also enrolled. Please submit your Financial Assistance Application by the May 1, 2022 deadline. Funds are limited so apply as soon as possible. Funds will be awarded on a first come first serve basis.

Transitional Grants

<table>
<thead>
<tr>
<th>PS4/TK to KE</th>
<th>5th to 6th Grade</th>
<th>8th to 9th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 500</td>
<td>$ 500</td>
<td>$ 500</td>
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</table>

Making Catholic Education Affordable for Every Family

Every LMC student benefits from local parishes and the Lake Michigan Catholic School Fund’s advancement efforts that provide $1,073,160 to make up the GAP between the cost of educating each student and the actual tuition. In addition, Parishioner Grants support 85% of LMC students.

Financial assistance is available and all families are encouraged to apply. Let us know how we can help you provide this valuable gift to your children. In the 2021-2022 school year, over $325,000 was awarded to LMC students in financial assistance.

Cost to educate an LMC student

28% Of LMC students receive Financial Assistance

85% Of LMC students received PARISHIONER GRANTS

Parishioner Grants range from $1000 to $2200
**LMC DAYCARE RATES**

**REGISTRATION** - To register for Daycare, you must fill out the Daycare portion of the Online Enrollment Registration Form. Registration is limited to 10 students, we encourage parents to sign up early.

**BILLING** - Parents are billed for Daycare monthly, and receive statements prior to the month of Daycare service.

<table>
<thead>
<tr>
<th>2 Day Day Care</th>
<th>3 Day Day Care</th>
<th>5 Day Day Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>LMC DAYCARE MONTHLY RATE</td>
<td>$ 150</td>
<td>$ 215</td>
</tr>
</tbody>
</table>

**LMC AFTER-SCHOOL CARE RATES**

**REGISTRATION** - To register for After-School Care, you must fill out the After-School Care Registration form. Due to limited space, we encourage you to register even if you think you might only use After-School Care one or twice during the school year. You may register at any time during the school year if space allows.

**REGISTRATION FEES** - There is a non-refundable registration fee of $10/child (with a $25 maximum /family). The registration fee is payable for the current school year and must be paid at the time of registration in order to hold your student(s) spot in the After-School Care Program.

**BILLING** - Parents will receive bi-weekly statements on the Facts System. Please check your account bi-weekly for the most recent billing.

<table>
<thead>
<tr>
<th>EACH CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td>LMC AFTER-SCHOOL CARE DAILY RATE</td>
</tr>
</tbody>
</table>

**LMC INTERNATIONAL STUDENT TUITION**

**APPLICATION & ENROLLMENT** - Contact the Admission Office to begin the application process

**BILLING** - International students must be fully paid before attending Lake Michigan Catholic Schools.

<table>
<thead>
<tr>
<th>Middle/High School (Grades 6th - 12th)</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTERNATIONAL TUITION RATE</td>
</tr>
</tbody>
</table>
In order to receive the Parish Grant, this form is required by all new families enrolling in the 2022-2023 Academic Year.

This is to certify that _________________________ is a registered family, attends mass regularly, is a contributing member of ________________________________ Parish,

and qualifies for the contributing parish member grant.

_________________________________________________________________

Priest’s Signature                                                        Date

Family Name: _______________________  Children Names: __________________

Address: ___________________________        ___________________

_________________________________________________________________

Parent Signature                                                         Date

This form must be signed by your pastor and returned to the Business Office, 915 Pleasant Street, St. Joseph, MI 49085
The parent(s) or guardian(s) checking the contract option in the online enrollment packet and submitting the online enrollment packet for a
student (the “undersigned”), agree(s) that the obligation to pay all fees and tuition for the student(s) listed below for the full academic year pursuant to
this contract is unconditional. The undersigned agree(s) that the obligations of this contract are not divisible or fractional. This means that after the
enrollment period, no portion of the fees and tuition paid or outstanding will be refunded or balance due cancelled without written approval from the
Director of Business Operations. * Except for students moving out of the service area of LMC, the obligation to pay fees and tuition remains
unconditional, including but not limited to the withdrawal, dismissal, or absence of the student from Lake Michigan Catholic Schools.

This enrollment contract is for a period of one year only. The schools’ obligations under this contract are conditional upon the successful completion
of the current academic year by the student. By submitting the online enrollment packet contract, the undersigned and the listed student(s) agree to
accept and abide by the rules and regulations of Lake Michigan Catholic Schools, as the rules and regulations presently exist or may be changed
from time to time by the school. The undersigned accept(s) and agree(s) to the schools’ policy that if an account is not current or paid in full (as
applicable) by May 30, 2023, the student’s grades will not be calculated and the student will not be allowed to start the 2023-2024 school year.
Grades and transcripts will be issued only when all accounts have been paid in full. In the event the undersigned fails to pay all fees and tuition by
May 30, 2023, then the undersigned will be responsible to school for all costs of collection, reasonable attorney’s fees, and a 1.5% per month late
fee.

* Prorated tuition will be refunded to those families moving out of the service area of the school system only upon receipt of school’s request for
transfer of student’s records form. Service area is defined as within 50 miles of 915 Pleasant Street, St. Joseph, MI. Enrollment Withdraw Fee of
$200 per student up to a maximum of $600 per family will be assessed.

**CONTRACT OPTIONS – 2022/2023 ACADEMIC YEAR – Select During Online Enrollment:**

**OPTION # 1**  Current Families - Pay the entire tuition balance by May 30, 2022

New Families - If enrolling before May 1, 2022, pay the full tuition balance by May 30, 2022, or
enrollment after May 1, 2022, within 30 days of enrollment date.

If total amount is not received by the due date of May 30, 2022, you will be required to use Option #2.
If payment is not received by May 30, 2022, a monthly interest fee will be calculated based on an
interest rate of 6% APR and charged to your account until the loan is completed.

**OPTION # 2**  Monthly Payments

If the amount you wish to finance is greater than or equal to $2,500, you must fill out the Horizon
Bank Tuition Loan Application form and submit it to the Business Office by May 1, 2022. There will
be $100 loan application processing fee that you will be charged by Horizon Bank to process your
loan application. The interest rate on the loan will be 5% APR.

If the amount you wish to finance is less than $2,500 then you will be required to sign a contract
directly with LMC for your monthly payments. The monthly payments will be calculated based on an
interest rate of 6% APR. Your tuition balance must be paid in full by May 30, 2023. A $10 late fee
will be charged to your account if your monthly payment is not received on time.

If the tuition loan has not been submitted by May 30, 2022 or within 30-days from enrollment date
after May 30, 2022, a monthly interest fee will be calculated based on an interest rate of 6% APR and
charged to your account until the loan is completed.

**OPTION # 3**  Lake Michigan Catholic Schools employee payroll deduction.

**OPTION # 4**  Request an alternate option. (If you select this option, Option #1 is binding until an alternate Contract
Agreement is reached.)

PAYMENT TYPES – 2022/2023 ACADEMIC YEAR:

TYPE # 1 Payments made by cash or check - No additional fee

TYPE # 2 Payments using Visa/Master Card - Please note, a 2% Merchant Fee will be added to your account when using this payment method.

Note: All payments can be made online using our LMC Payment Portal at www.lmclakers.org or by sending in your payment to the Business Office at 915 Pleasant St. St. Joseph, MI 49085

The undersigned agree(s) to the terms of this enrollment contract and acknowledges(s) the tuition refund policy of the school stated above.
Actions Necessary to Finalize Your Tuition Assistance Application

☐ Complete Tuition Assistance Application

☐ Attach a copy of your 2021 Federal Tax Return

☐ Attach a copies of your 2021 W-2’s

☐ Attach any other information as specified on the application form

☐ Submit your completed application and supporting documentation to Covenant Tuition Services in one of the following ways:
  • Mail: Covenant Tuition Services
    PO Box 111
    Fulton, IL 61252
  • Email: info@cts-tuition.com
  • Phone: 815-441-7432
  • Fax: 815-401-4001
  • Go to: http://www.cts-tuition.com/app/lakstjmi/

☐ Make your application processing fee payment

To be eligible and qualify for Financial Assistance, complete and submit all information to Covenant Tuition Services(CTS) prior to the deadline date of 5/1/2022. Funds are limited so apply as soon as possible. Funds will be awarded on a first come first serve basis.
*Payment Options*

A check for $25.00 may be mailed with the application (or mailed separately if you choose to fax or email your application to CTS)

If you would like to pay by card instead of by check for $25.00, there is a $2.00 service charge. CTS can send you an invoice from PayPal where you can make your $27.00 payment securely online.

Name of Parent on Application: ____________________________________________

Address: ______________________________________________________________

City, State, and Zip: _____________________________________________________

Phone: ____________________________

**To receive a PayPal invoice, please list your email on the line below:**

Email to send invoice: ____________________________________________________

By signing below, I agree to pay the $27.00 invoice from CTS to pay for processing this application. I also understand that an unpaid invoice will hold up the processing of this application.

Signature: ____________________________

Employment Status (Select # from below for each Parent): Father: _______ Mother: _______

1. Employed by Another
2. Self-employed
3. Temporarily Unemployed
4. Full Time Homemaker
5. Unemployed
6. Retired/Permanently Disabled
7. Temporarily Disabled
8. Full Time Student

Total Tuition 2022/2023 Academic Year: $ _______ Required

Amount of Tuition Family Can Pay: $ _______ Required

Amount of Tuition Relatives/Others Can Pay: $ _______ Required
Covenant Tuition Services
Covenanting to Serve Christian Schools as unto the Lord
www.cts-tuition.com/app/lakstjmi/
Tuition Assistance for the
2022-2023 Academic School Year

Lake Michigan Catholic Schools
915 Pleasant St • St. Joseph, MI 49085 • Phone: 269-983-5529 • www.lmclakers.org
Due Date: May 1st, 2022

Parent/Guardian Name: ____________________________
Number of persons in household: ____________________
Number of adults in household: _____________________
Marital Status: (Circle one)
Married       Single       Single Parent Sharing Expenses

Household Income
1. 2021 Adj Gross Income:__________________________
   (Total for all household adults; Line #11 from Federal Taxes)
2. 2021 Earned Income Credit:_______________________
   (Line #27 from Federal Taxes)
3. 2021 Father’s W-2 income:_______________________
   (W-2 box 3)
4. 2021 Mother’s W-2 income:_______________________
   (W-2 box 3)
5. 2021 Social Security Benefits:___________________
   (Include statements for all household recipients)
6. 2021 Child Support Received:____________________
   (Include total for all household recipients)
7. 2021 Military/Clergy House Allowance:___________
8. 2021 Non-taxable income:_______________________
   (W-2 box 12; ADC; General Assistance; Food Stamps, others)

Household Assets
15. Household Adults’ Cash on Hand:_________________
    (Total in all: Cash, Checking, and savings)
16. Value of Home _________________________________
17. Value owed on Home: __________________________
18. Value of stocks, bonds, investments:_____________
    (Exclude retirement and pension accounts)
19. Value of other assets owned:___________________
    Circle type: real estate business farm
20. Amount owed on assets in #19:__________________
21. Automobiles – year, make, and model:____________

Household Deductions
   (Line #22 from Federal Taxes)
10. 2021 Medical/Dental expenses:__________________
    (Expenses not covered by insurance and premiums paid outside of
    an employer’s plan. You must provide a Schedule A or an itemized
    list of expense.)
11. 2021 Child Support Paid:_______________________
    (Total paid for children not in household)
12. 2021-2022 K-12 Tuition Paid:___________________
    (Total after all amounts paid on your behalf by others, grants, and
    gifts are subtracted. Don’t include college tuition here, See #22)
13. 2021 Church contributions:_____________________
    (Include Schedule A or letter from the church)
14. 2021 Childcare expenses:_______________________
    (Include Form 2441 or bill from provider)

Other Information
22. 2021 Household college tuition paid:_____________
    (Include Form 8863 or bill from college showing amount paid)
23. List weekly unemployment amount for all
    unemployed household parents: _________________
24. Additional sheets can be used to explain special
    circumstances if necessary, for processing, such as
    medical hardships, changes in employment that will
    cause increase or decrease in income, etc.

Complete form and send with the following required items:
1. Payment for processing (choose only one option)
a. Check/Money Order for $25. Please do not mail cash.
   PayPal invoice for $27
2. Copy of 2021 Federal Tax Return and 2020 W-2(s)
3. Copy of Schedules and Forms filled with the tax return; Required
   items are Schedules: 1, A, C, E, F and Forms: 2441 and 8863
4. Any other supporting documents listed for questions #3-#22

Applications can be sent one of the following three ways:
1. Mail: Covenant Tuition Services
   PO Box 111
   Fulton, IL 61252
2. Email: info@cts-tuition.com
3. Fax: 815-401-4001
TUITION REFUND POLICY

To facilitate sound budget practices, there will be absolutely no refunds of tuition, withdrawal or dismissal, granted to any family enrolled in the school. Except for students moving out of the service area of LMC, the obligation to pay fees and tuition remains unconditional.

Prorated tuition will be refunded to those families moving out of the service area (within 50 miles of 915 Pleasant Street, St. Joseph, MI) upon receipt of new school’s request for transfer of student’s records form. Enrollment Withdrawal Fee of $200 per student up to a maximum of $600 per family will be assessed.

In adherence of this policy, all families who have enrolled online have electronically signed the contract for this obligation.
AFTER SCHOOL CARE REGISTRATION

Lake Michigan Catholic Elementary School offers an outstanding After School Care program. This program runs from the end of the school day to 5:30 p.m. every full day of school. Under the direction of Mrs. Sue Zilke, this program provides a wonderful family environment with professional care, supervision, recreation and many enrichment activities for 3 and 4-year-old preschoolers and TK students who attend our afternoon Day Care and students in Kindergarten through Grade 5.

Activities are planned to nurture and promote growth within a Catholic environment. Gym or outside play, arts and music and time set aside for homework help are offered daily along with daily and weekly special events. This program also strives to promote strong feelings of worth in themselves, with each other and our environment in a caring and compassionate way.

The program cost for the 2022-2023 school year is $15.00/child per day. The business office will bill on a bi-weekly basis through your Facts account and will be due one week later. You will receive an email notification when the bill has been posted. Payments to the program must match these statements. Payments can be made online through the payment portal at www.lmclakers.org, or by sending cash or check to the elementary school office or business office downtown.

Registration is required and space is limited. There is a registration fee of $10.00/child ($25.00 maximum/family). This fee is to be paid at the time of registration and is non-refundable. The registration fee must be paid at the time of registration in order to hold your spot. We also encourage you to register now even if you think you might only use After School Care once or twice during the school year.

PLEASE NOTE THAT REQUESTS FOR DROP IN CARE MUST BE MADE 24 HOURS IN ADVANCE.

If you have any questions or concerns, please feel free to contact me at 429-0227.

Thank you,

Sue Zilke
After School Care Coordinator
szilke@lmclakers.org
Registration Fee: $10.00 per child ($25.00 maximum per family
Must be paid with Registration Form

Cost for After School Care: $15.00/child per day

Please indicate below which program you are interested in for your child

<table>
<thead>
<tr>
<th>Child’s Name</th>
<th>Grade</th>
<th>Full Time 2:50pm - 5:30pm (Yes/No)</th>
<th>Part Time 2:50pm - 5:30pm (Circle days interested in)</th>
<th>As Needed Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
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<td>Mon      Tues    Wed    Thurs   Fri</td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
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<td>Mon      Tues    Wed    Thurs   Fri</td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
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<td></td>
<td></td>
<td></td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
<td>Mon      Tues    Wed    Thurs   Fri</td>
</tr>
</tbody>
</table>

Parent’s name (s) ____________________________________________________________

Parent’s signature __________________________________________________________

Date ________________________________________________________________

For Official Use Only:

Registration Fee (Non-refundable): $10.00 per child or $25 Maximum per family

Date: ___________________________ Amount Paid: $______________

Cash _____ Check # ____________ Pay Portal _____
STUDENT TUITION LOAN

SCHOOL YEAR 2022-2023

Horizon Bank is proud to offer a tuition loan program with Lake Michigan Catholic Schools. The loan has a 13.67% APR* with an interest rate of 5.00% up to 10 months.

Contact an Advisor today to see how we can help.

St. Joseph
811 Ship Street
(269) 982-3200
**Refer to the image for the complete document content.**
**AGE REQUIREMENT**

<table>
<thead>
<tr>
<th>Age Level</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Year Old Preschool</td>
<td>Must be 3 years old by September 1, 2022</td>
</tr>
<tr>
<td></td>
<td>Must be completely potty trained in order to attend</td>
</tr>
<tr>
<td>4 Year Old Preschool</td>
<td>Must be 4 years old by September 1, 2022</td>
</tr>
<tr>
<td>Transitional Kindergarten</td>
<td>Must be 5 years old by September 1, 2022</td>
</tr>
<tr>
<td>Kindergarten</td>
<td>Must be 5 years old by September 1, 2022</td>
</tr>
</tbody>
</table>

**SCREENING PROCEDURES**

1) Preschool students are not screened.

2) All students registered for Transitional Kindergarten and Kindergarten will automatically be screened. You do not have to request screening. After the screening is completed, you will be notified of the results.

3) If you do not register but request testing, there will be a $50.00 nonrefundable testing fee.
To Parents of Incoming Preschool, Transitional Kindergarten and Kindergarten Students

It is required by law of the State of Michigan that all children be tested for vision and hearing prior to entry into Transitional Kindergarten or Kindergarten. This testing may be done through your child’s pediatrician during his/her annual check-up and immunizations prior to start of the school year. You may also go to the BCHD hearing and vision clinics (see attached sheet). Please be aware that some pediatricians do not check hearing and vision as part of the check-up so you will have to visit one of the clinics.

Lake Michigan Catholic Elementary requires that all children be tested for vision and hearing prior to entry into Preschool. Every effort should be made to have the testing done prior to the first day of school. We encourage you to have your preschool child tested at one of the Health Dept. clinics as most doctors will not do vision/hearing testing on children that young.

Please note: BCHD testing is done AFTER the age of three. So, students registered for the LMCE Preschool need to be 3 before tested at any of the Health Dept. Clinics. Please do not go to any of the clinic dates listed prior to your child turning 3 as he/she will not be tested by the Health Department. Please do not call the Health Dept.

You may go to any of the clinic sites listed. The clinic is a free service of the Berrien County Health Department. Please remember it is the responsibility of the parents to see that hearing and vision are checked before the first day of school and that the school receives documentation of the screenings.

If your child attended Preschool or Transitional Kindergarten at Lake Michigan Catholic during the 2021/2022 school year and was tested for vision/hearing prior to entry, he/she does not need to be tested again before entering Transitional Kindergarten/Kindergarten. If your child attended Preschool at Lake Michigan Catholic Elementary and was not tested for vision/hearing prior to entering, they must be tested before the beginning of the 2022/2023 school year.

If you have any questions, please feel free to call the school office at (269) 429-0227.
<table>
<thead>
<tr>
<th>LOCATION</th>
<th>DATE</th>
<th>TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>BCHD 1205 N Front St Niles</td>
<td>Tuesday, June 14, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 2149 E Napier Benton Harbor</td>
<td>Wednesday, July 22, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 1205 N Front St Niles</td>
<td>Tuesday, July 12, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 2149 E Napier Benton Harbor</td>
<td>Thursday, July 14, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 21 N Elm, Three Oaks</td>
<td>Thursday, July 21, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 1205 N Front St Niles</td>
<td>Tuesday, July 26, 2022</td>
<td>1:00 – 5:45</td>
</tr>
<tr>
<td>BCHD 2149 E Napier Benton Harbor</td>
<td>Thursday, July 28, 2022</td>
<td>1:00 - 5:45</td>
</tr>
<tr>
<td>BCHD 2149 E Napier Benton Harbor</td>
<td>Thursday, August 4, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 1205 N. Front St. Niles</td>
<td>Tuesday, August 16, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 2149 E Napier Benton Harbor</td>
<td>Thursday, August 18, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
<tr>
<td>BCHD 2149 E, Napier Benton Harbor</td>
<td>Tuesday August 23, 2022</td>
<td>9:00-6:00</td>
</tr>
<tr>
<td>BCHD 2149 E Napier Benton Harbor</td>
<td>Monday, August 29, 2022</td>
<td>9:00-11:45; 1:30-5:45</td>
</tr>
<tr>
<td>BCHD 1205 N Front St Niles</td>
<td>Tuesday, August 30, 2022</td>
<td>8:30-11:30; 1:30-3:45</td>
</tr>
</tbody>
</table>

**APPOINTMENTS REQUIRED**

**ANY QUESTIONS PLEASE CALL:**
Lisa Peeples-Hurst at 269-927-5690
HEALTH APPRAISAL

Dear Parent or Guardian: The following information is requested so that the school can work with the parent to meet the physical, intellectual and emotional needs of the child. Fill out the information requested in Section I. Section III may be certified by the transcription of information from the certificate of immunization. The remaining sections are to be completed by a doctor, nurse and dentist. (BE SURE TO BRING YOUR CHILD'S IMMUNIZATION RECORDS TO THE EXAMINATION.)

PERSONAL

<table>
<thead>
<tr>
<th>CHILD'S NAME (Last, First, Middle)</th>
<th>DATE OF BIRTH (mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Number &amp; Street)</th>
<th>(City)</th>
<th>(ZIP Code)</th>
<th>TODAY'S DATE (mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PARENT/GUARDIAN (Last, First, Middle)</th>
<th>HOME TELEPHONE NUMBER ( )</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Number &amp; Street)</th>
<th>(City)</th>
<th>(ZIP Code)</th>
<th>WORK TELEPHONE NUMBER ( )</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SECTION I - HEALTH HISTORY

# Is your child having any of the problems listed below?

☐ ☐ ☐ 1 Allergies or Reactions (for example, food, medication or other)
☐ ☐ ☐ 2 Hay Fever, Asthma, or Wheezing
☐ ☐ ☐ 3 Eczema or Frequent Skin Rashes
☐ ☐ ☐ 4 Convulsions/Seizures
☐ ☐ ☐ 5 Heart Trouble
☐ ☐ ☐ 6 Diabetes
☐ ☐ ☐ 7 Frequent Colds, Sore Throats, Earaches (4 or more per year)
☐ ☐ ☐ 8 Trouble with Passing Urine or Bowel Movements
☐ ☐ ☐ 9 Shortness of Breath
☐ ☐ ☐ 10 Speech Problems
☐ ☐ ☐ 11 Menstrual Problems
☐ ☐ ☐ 12 Dental Problems: Date of Last Exam / /
☐ ☐ ☐ Other (please describe):

☐ ☐ Does your child take any medication(s) regularly?

Reason for Medication

Parent/Guardian Signature ___________________________ Date / /

Was the health history reviewed by a health professional? ☐ Yes ☐ No
Examiner's Initials ___________________________

SECTION II - PHYSICAL EXAMINATION, INSPECTION, TESTS AND MEASUREMENTS

Required for Child Care and Head Start / Early Head Start

<table>
<thead>
<tr>
<th>Tests and Measurements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was child tested for:</td>
</tr>
<tr>
<td>Test results:</td>
</tr>
<tr>
<td>Normal</td>
</tr>
<tr>
<td>Under Care</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>Was child tested for:</td>
</tr>
<tr>
<td>Test results:</td>
</tr>
<tr>
<td>Normal</td>
</tr>
<tr>
<td>Under Care</td>
</tr>
</tbody>
</table>

VISION

☐ ☐ ☐ Visual Acuity
☐ ☐ ☐ Muscle Imbalance
☐ ☐ ☐ Other: __________

HEARING

☐ ☐ ☐ Audimeter
☐ ☐ ☐ Other: __________

URINALYSIS

☐ ☐ ☐ Sugar
☐ ☐ ☐ Albumin
☐ ☐ ☐ Microscopic

BLOOD LEAD LEVEL

Level _______ ug/dl

NOTE: Blood lead level required for all children enrolled in Medicaid must be tested at one and two years of age, or once between three and six years of age if not previously tested. All children under age six living in high-risk areas should be tested at the same intervals as listed above.

Examinations and/or Inspections

MICH/BCAL-3305 (formerly OCAL 3305/BRS-3305) Page 1 of 2

Examin Date / / June 2012
## SECTION III - IMMUNIZATIONS

Statements such as "UP-TO-DATE" or "COMPLETE" will not be accepted. Admission to school may be denied on the basis of this information.

<table>
<thead>
<tr>
<th>VACCINES (Circle Type)</th>
<th>DATE ADMINISTERED MM/DD/YYYY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B (Hep B)</td>
<td>1 3</td>
</tr>
<tr>
<td>DTP/DT/P/Td</td>
<td>2 4</td>
</tr>
<tr>
<td>Haemophilus Influenza</td>
<td>1 3</td>
</tr>
<tr>
<td>Polio (IPV/OPV)</td>
<td>1 3</td>
</tr>
<tr>
<td>Pneumococcal Conjugate</td>
<td>1 3</td>
</tr>
<tr>
<td>Rotavirus (RV1/RV6)</td>
<td>1 2</td>
</tr>
<tr>
<td>Measles, Mumps, Rubella</td>
<td>1 2</td>
</tr>
<tr>
<td>Varicella (Chickenpox)</td>
<td>1 2</td>
</tr>
</tbody>
</table>

History of Chickenpox Disease? Yes No
If yes, date:
I certify that the immunization dates are true to the best of my knowledge

<table>
<thead>
<tr>
<th>VACCINES (Circle Type)</th>
<th>DATE ADMINISTERED MM/DD/YYYY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A (Hep A)</td>
<td>1 2</td>
</tr>
<tr>
<td>Influenza (TIV/LAV)</td>
<td>1 3</td>
</tr>
<tr>
<td>Meningococcal (MCV4 / MPSV4)</td>
<td>1 2</td>
</tr>
<tr>
<td>Human Papillomavirus</td>
<td>1 3</td>
</tr>
<tr>
<td>Type of Vaccine(s)</td>
<td>Date of Vaccination(s)</td>
</tr>
</tbody>
</table>

Indicate and attach physician diagnosis or laboratory evidence of immunity as applicable

NOTE: According to Public Act 368 of 1978, any child enrolling in a Michigan school for the first time must be adequately immunized, vision tested and hearing tested. Exemptions to these requirements are granted for medical, religious and other objections, provided that the waiver forms are properly prepared, signed and delivered to school administrators. Forms for these exemptions are available at your child’s school or local health department.

Parent/Guardian refused immunizations: □

Health Professional’s Signature

Title

Date

## SECTION IV - RECOMMENDATIONS

(Required for Child Care and Head Start/Early Head Start)

□ □ □ Is there any defect of vision, hearing or other condition for which the school could help by seeing or other actions? If yes, please explain:

□ □ □ Should the child’s activity be restricted because of any physical defect or illness?

If yes, check and explain degree of restriction(s):

□ Classroom □ Playground □ Gymnasium □ Swimming Pool □ Competitive Sports □ Other

Other Recommendations

## SECTION V - DENTAL EXAMINATION AND RECOMMENDATIONS (OPTIONAL)

I have examined ________'s teeth. As a result of this examination, my recommendation for treatment is:

________

Dentist’s Signature / Date

## PHYSICIAN’S SIGNATURE

Examiner's Signature / Date

Examiner’s Name (Print or Type)

Degree or License

Number & Street

City

MI

ZIP Code

Telephone

Information required for:

Early On - Hearing and Vision Status; Diagnosis; Health Status
Child Care Licensing - Physical Exam, Restrictions, Immunizations
Head Start/Early Head Start - Determination that child is up-to-date on a schedule of age-appropriate preventive and primary health care, including medical, dental, and mental health. The schedule must incorporate the well-child care visit required by EPSDT and the latest immunizations schedule recommended by the Centers for Disease Control and Prevention, State, tribal, and local authorities. An EPSDT well-child exam includes height, weight, and blood tests for anemia at regular intervals based on age.


MDCH/BCAL 3305 (formerly OCAL 3305/BRS-3305) Page 2 of 2 Rev. June 2012
**MEDICAL HISTORY: Completed by Parent or Guardian of 18-Year-Old**

**GENERAL QUESTIONS**

- **Do you have any history of juvenile arthritis or connective tissue disease?**
- **How many periods have you had in the last 12 months?**
- **Do any of your joints become painful, swollen, feel warm or look red?**
- **How old were you when you had your first menstrual period?**
- **Have you ever had any broken or fractured bones, dislocated joints or stress fracture?**
- **Are you trying to or has anyone recommended that you gain or lose weight?**

**SKIN**

- **HSV:**
- **Lesions suggestive of MRSA, tinea corporis:**
- **Foot/Toes:**
- **Hip/Thigh:**
- **Eyes/Ears/Nose/Throat:**
- **Pupils Equal:**
- **Hearing:**

**HEART HEALTH QUESTIONS ABOUT YOU**

- **Do you have any ongoing medical conditions? If so, please identify below:**
- **Have you ever used an inhaler or taken asthma medicine?**
- **Has a doctor ever denied or restricted your participation in sports for any reason?**
- **Have you ever had any heart problems?**
- **Do you have any history of heart murmurs?**
- **Has your heart ever raced or skipped beats (irregular beats) during exercise?**
- **Have you ever had a herpes or MRSA skin infection?**

**HEART HEALTH QUESTIONS ABOUT YOUR FAMILY**

- **Has anyone in your family had unexplained fainting, unexplained seizures or near drowning?**
- **Has anyone in your family had unexplained heart problems or unexpected sudden death before age 50 (including drowning, unexplained car accident or sudden infant death syndrome)?**
- **Has anyone in your family had unexplained heart problems or unexpected sudden death before age 50 (including drowning, unexplained car accident or sudden infant death syndrome)?**
- **Has anyone in your family had unexplained fainting, unexplained seizures or near drowning?**
- **Has anyone in your family had unexplained heart problems or unexpected sudden death before age 50 (including drowning, unexplained car accident or sudden infant death syndrome)?**

**GENERAL QUESTIONS**

- **Do you have any history of juvenile arthritis or connective tissue disease?**
- **How many periods have you had in the last 12 months?**
- **Do any of your joints become painful, swollen, feel warm or look red?**
- **How old were you when you had your first menstrual period?**
- **Have you ever had any broken or fractured bones, dislocated joints or stress fracture?**
- **Are you trying to or has anyone recommended that you gain or lose weight?**

**SKIN**

- **HSV:**
- **Lesions suggestive of MRSA, tinea corporis:**
- **Foot/Toes:**
- **Hip/Thigh:**
- **Eyes/Ears/Nose/Throat:**
- **Pupils Equal:**
- **Hearing:**

**HEART HEALTH QUESTIONS ABOUT YOU**

- **Do you have any ongoing medical conditions? If so, please identify below:**
- **Have you ever used an inhaler or taken asthma medicine?**
- **Has a doctor ever denied or restricted your participation in sports for any reason?**
- **Have you ever had any heart problems?**
- **Do you have any history of heart murmurs?**
- **Has your heart ever raced or skipped beats (irregular beats) during exercise?**
- **Have you ever had a herpes or MRSA skin infection?**
I, _______________________________________________, an 18-year-old, or the parent or guardian of __________________________________________________, recognize that as a result of athletic participation, medical treatment on an emergency basis may be necessary, and further recognize that school personnel may be unable to contact me for my consent for emergency medical care. I hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the then-existing circumstances and to assume the expenses of such care.

Additionally, I hereby state that, to the best of my knowledge, my answers to the medical history questions (see reverse) are complete and correct.

The information submitted herein is truthful to the best of my knowledge. By my/my child’s signature below, I/We acknowledge that I/we have received concussion educational information that meets Michigan Department of Health and Human Services and MHSAA requirements.

Further, in consideration of my/my child’s participation in MHSAA-sponsored athletics, I/we hereby agree, understand, appreciate, and acknowledge that participation in such athletics is purely voluntary; that such activities involve physical exertion and contact and that there is inherent risk of personal injury associated with participation in such activities, which risk I/we assume; and that I/we agree to, and hereby waive any and all claims, suits, losses, actions, or causes of action against the MHSAA, its members, officers, representatives, committee members, employees, agents, attorneys, insurers, volunteers, and affiliates based on any injury to me, my child, or any person, whether because of inherent risk, accident, negligence, or otherwise, during or arising in any way from my/my child’s participation in an MHSAA-sponsored sport.

I/We understand that I/we are expected to adhere firmly to all established athletic policies of my school district and the MHSAA. I/we hereby give my consent for the above student to engage in interscholastic athletics and for the disclosure to the MHSAA of information otherwise protected by FERPA and HIPAA for the purpose of determining eligibility for interscholastic athletics. My child has my permission to accompany the team as a member on its out-of-town trips.

I/We acknowledge that I/we have received the specific insurance regulations of the school district. The student-athlete has health insurance: ☐ YES ☐ NO

If YES, Family Insurance Co: ____________________________________ Insurance ID #: __________________________________________

If YES, Family Insurance Co: ____________________________________ Insurance ID #: __________________________________________

Our son/daughter will comply with the specific insurance regulations of the school district. The student-athlete has health insurance: ☐ YES ☐ NO

If YES, I/We hereby state that, to the best of my knowledge, my answers to the medical history questions (see reverse) are complete and correct.

I, _______________________________________________, an 18-year-old, or the parent or guardian of __________________________________________________, recognize that as a result of athletic participation, medical treatment on an emergency basis may be necessary, and further recognize that school personnel may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the then-existing circumstances and to assume the expenses of such care.

Additional information to be completed by student, parent/guardian and/or 18-year-old.

Mother/Guardian Name: __________________________________________________________________________________________________________

Phone (home): _________________________________ (work): _______________________________ (cell): ______________________________________

Email Address: Parent/Guardian/18-Year-Old: ____________________________________________

Student Address: _______________________________________________________________________________________________________________

School: _________________________________________________________________________ Circle Grade: ____________________________

Gender: ☐ M ☐ F Age:____ Date of Birth: __________ Place of Birth (City/State): __________________________

Father/Guardian Name: __________________________________________________________________________________________________________

Phone (home): _________________________________ (work): _______________________________ (cell): ______________________________________

Mother/Guardian Name: __________________________________________________________________________________________________________

Phone (home): _________________________________ (work): _______________________________ (cell): ______________________________________

Pre-Participation Physical Form: Page 2 of 2


**UNDERSTANDING CONCUSSION**

<table>
<thead>
<tr>
<th>Some Common Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headache</td>
</tr>
<tr>
<td>Pressure in the Head</td>
</tr>
<tr>
<td>Nausea/Vomiting</td>
</tr>
<tr>
<td>Dizziness</td>
</tr>
<tr>
<td>Balance Problems</td>
</tr>
<tr>
<td>Double Vision</td>
</tr>
<tr>
<td>Blurry Vision</td>
</tr>
<tr>
<td>Sensitive to Light</td>
</tr>
<tr>
<td>Sensitive to Noise</td>
</tr>
<tr>
<td>Sluggishness</td>
</tr>
<tr>
<td>Haziness</td>
</tr>
<tr>
<td>Fogginess</td>
</tr>
<tr>
<td>Poor Concentration</td>
</tr>
<tr>
<td>Memory Problems</td>
</tr>
<tr>
<td>Confusion</td>
</tr>
<tr>
<td>&quot;Feeling Down&quot;</td>
</tr>
<tr>
<td>Not “Feeling Right”</td>
</tr>
<tr>
<td>Feeling Irritable</td>
</tr>
<tr>
<td>Slow Reaction Time</td>
</tr>
<tr>
<td>Sleep Problems</td>
</tr>
</tbody>
</table>

**WHAT IS A CONCUSSION?**

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a fall, bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. A concussion can be caused by a shaking, spinning or a sudden stopping and starting of the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. A concussion can happen even if you haven’t been knocked out.

You can’t see a concussion. Signs and symptoms of concussions can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If the student reports any symptoms of a concussion, or if you notice symptoms yourself, seek medical attention right away. A student who may have had a concussion should not return to play on the day of the injury and until a health care professional says they are okay to return to play.

**IF YOU SUSPECT A CONCUSSION:**

1. **SEEK MEDICAL ATTENTION RIGHT AWAY** – A health care professional will be able to decide how serious the concussion is and when it is safe for the student to return to regular activities, including sports. Don’t hide it, report it. Ignoring symptoms and trying to “tough it out” often makes it worse.

2. **KEEP YOUR STUDENT OUT OF PLAY** – Concussions take time to heal. Don’t let the student return to play the day of injury and until a health care professional says it’s okay. A student who returns to play too soon, while the brain is still healing, risks a greater chance of having a second concussion. Young children and teens are more likely to get a concussion and take longer to recover than adults. Repeat or second concussions increase the time it takes to recover and can be very serious. They can cause permanent brain damage, affecting the student for a lifetime. It can be fatal. It is better to miss one game than the whole season.

3. **TELL THE SCHOOL ABOUT ANY PREVIOUS CONCUSSION** – Schools should know if a student had a previous concussion. A student’s school may not know about a concussion received in another sport or activity unless you notify them.

**SIGNS OBSERVED BY PARENTS:**

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Can’t recall events prior to or after a hit or fall
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes

**CONCUSSION DANGER SIGNS:**

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. A student should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people/places
- Becomes increasingly confused, restless or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously.)

**HOW TO RESPOND TO A REPORT OF A CONCUSSION:**

If a student reports one or more symptoms of a concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of athletic play the day of the injury. The student should only return to play with permission from a health care professional experienced in evaluating for concussion. During recovery, rest is key. Exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse. Students who return to school after a concussion may need to spend fewer hours at school, take rests breaks, be given extra help and time, spend less time reading, writing or on a computer. After a concussion, returning to sports and school is a gradual process that should be monitored by a health care professional.

Remember: Concussion affects people differently. While most students with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

To learn more, go to [www.cdc.gov/concussion](http://www.cdc.gov/concussion).
CONCUSSION AWARENESS

EDUCATIONAL MATERIAL ACKNOWLEDGEMENT FORM

By my name and signature below, I acknowledge in accordance with Public Acts 342 and 343 of 2012 that I have received and reviewed the Concussion Fact Sheet for Parents and/or the Concussion Fact Sheet for Students provided by ____________________________ Sponsoring Organization

__________________________________________  ________________________________________
Participant Name Printed                           Parent or Guardian Name Printed

__________________________________________  ________________________________________
Participant Name Signature                         Parent or Guardian Name Printed

__________________________________________  ________________________________________
Date                                               Date

Return this signed form to the sponsoring organization that must keep on file for the duration of participation or age 18.

Participants and parents please review and keep the educational materials available for future reference.
As a school, we value the safety of children in our care, our employees and volunteers and people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, the Diocese of Kalamazoo mandates that criminal history background checks be conducted for all employees and volunteers who have unsupervised contact with a child, the elderly or persons with disabilities. Please complete this form of basic information about you, which assures the best possible program and safety for all.

Please complete your responses to the following questions and return this form to the LMC Business Office 915 Pleasant St., St. Joseph, MI 49085  Tel: (269) 983-5529  Fax: (269) 983-5520

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>*Sex</th>
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<table>
<thead>
<tr>
<th>Address</th>
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</table>

Known by any other name(s) (i.e.) maiden

<table>
<thead>
<tr>
<th>Home Phone</th>
<th>Work Phone</th>
<th>Cell Phone</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

Number of Years in Michigan ______

If less than 7, previous residence(s) outside of Michigan

<table>
<thead>
<tr>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
<th>Dates</th>
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<tbody>
<tr>
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</tbody>
</table>

List additional addresses on the back of form

If you have been employed outside the State of MI in the past 7 years, please provide Name, City, State, of employer. They will not be contacted; however a background check will be done in that state(s).

<table>
<thead>
<tr>
<th>Name of Employer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

List additional addresses on back of form

Driver’s License # Please send a copy of license. | State | Social Security No. |
<table>
<thead>
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</table>

Position for which you are applying or volunteering

Authorization

I understand that investigative inquires on my criminal and driving background are to be made on me, to assess whether any reason exists that would suggest that I not be accepted for the position. These inquiries will be made according to practices of the hiring entity and will consist of a criminal background check and/or driving record check using the resources of the Diocese of Kalamazoo or a designated outside firm. The information received will be used only to determine my suitability for the above position.

I authorize this criminal background check and/or driving record check to be undertaken and also any party contacted to furnish any and all information requested. A photocopy of this authorization may be considered as valid as the original for purposes of conducting the necessary investigation.

Signature of Applicant/Volunteer/Employee __________________________  Date __________________________

* NOTE: Date of birth, race and sex are being requested only for purposes of identification in obtaining accurate retrieval of records. To be a volunteer, you must complete the “Protecting God’s Children” (Virtus) Training. Please see below to register.
Per Diocesan policy, anyone who volunteers or works in any capacity at the parish or school level must complete the Protecting God’s Children Program.

How To Create an Online Account and Register For A Session:
Please register online for an Awareness session (Virtus training). If you do not have internet access, contact Juliana Sarno at (269) 983-5529. She will give you alternate sites you can use.

You need an email address. It will be used for the follow-up bulletins, if required to do continuing online training. If you do not have an email address, please let your supervisor or Juliana know. They will help you get a free email account at Yahoo! You may use noaddress@virtus.org for now.

Type www.virtusonline.org in your browser’s address bar. Click the light green box labeled “FIRST-TIME REGISTRANT”. Select “Begin the Registration Process”. Select “Kalamazoo, MI” (Diocese) as your organization.

Choose a user name and password you can easily remember. Try using your first and last name, no spaces and small letters. Click “Continue”. Provide the information requested on the following page. Click “Continue” to proceed. Provide the requested information.

Select “LAKE MICHIGAN CATHOLIC SCHOOLS (St. Joseph)” where you volunteer or work. Select the “role(s)” that you serve within your organization. Please check all that apply. Additionally, if you have a title within your diocese, enter it in the box, i.e. Teacher, DRE, Catechist, Coach & etc.

Click “Continue” to proceed. Answer four yes/no questions. Click “Continue” to proceed. If you have already attended a Protecting God’s Children Session, click “YES” otherwise click “NO”.

- If you choose “NO” during the previous step, you will be presented with a list of upcoming sessions within your organization. When you find the session you would like to attend, click the “circle” next to the title.
- If you choose “YES” during the previous step, skip this step. If you chose “YES”, you will be presented with a list of all sessions that have been held within your organization. Choose the session you attended by clicking the downward arrow and highlighting the session., then click “Complete Registration”. You will see a message confirming that you have completed the registration process. If you have correctly entered your email address you will receive an email confirmation.

Please email Juliana at jsarno@lmclakers.org when you have completed the online training module.
FREQUENTLY ASKED QUESTIONS

Who has to attend the Protecting God’s Children awareness program?

- All Clergy
- All employees of the Diocese of Kalamazoo and their parishes and schools
- All volunteers who have contact with LMC Students

Why do I have to attend these sessions? I am not a threat to children!

You are not being blamed for child sexual abuse. You are seen as the solution. You will be trained to identify the risks to children early enough to prevent child sexual abuse from occurring.
Lake Michigan Catholic Schools will provide a financial incentive in the form of a tuition credit of **$2,000.00** to current families for each new family with students to be enrolled in grades KE through 12th or **$1,000.00** to current families for each new family with students to be enrolled in grades PS through TK, during the 2022-2023 school year. The credit for new students will be applied to your account when the new student enters KE or above.

You have an opportunity to spread our mission:

* Nourishing the Human Spirit ~ Mind, Body and Soul ~ Through Jesus Christ

In doing so, you have an excellent opportunity to reduce your tuition for the 2022-2023 school year.

The Details:
1. For each new family recruited into the Laker family in 2022-2023, current LMC families will receive a $2,000 (KE through 12th).
2. For each new family recruited into the Laker family in 2022-2023, current LMC families will receive a $1,000 (PS through TK) credit. The credit will be applied to your account when the new student enters KE or above.
3. Credits are applied on a per family basis, not on a per student basis.
4. The credit may be applied to tuition only. Other fees (where applicable) must be paid.
5. Newly recruited families will be required to sign an affidavit identifying the sponsoring family to receive the tuition credit.
6. Tuition credits cannot be transferred from one family to another without approval of administration.
7. There will be no residual credit applied above and beyond the amount due for the 2022-2023 school year.
8. The actual cash value of the tuition credit is zero dollars. Any benefits from the program are in the form of tuition credits for the Lake Michigan Catholic Schools.
9. Families who have departed LMC and later decide to return are not eligible to be sponsored for the incentive.
10. Full tuition credits will be awarded until the final count date in August for enrollment established by the Diocese of Kalamazoo. Credits will be pro-rated on the basis of remaining school days for families enrolling after this date.
11. In the event of a split family (children in the Lake Michigan Catholic Schools and other districts) the admission of another child from the split family to the Lake Michigan Catholic Schools is not an eligible event for the incentive.
What is SCRIP?
SCRIP is an ongoing program at Lake Michigan Catholic Schools. In this program LMC is able to purchase gift certificates from numerous merchants at a discounted rate and then sell them to our participants at face value.

How will this program benefit my family?
100% of the profit earned by your family’s participation can be directed to an area of your choosing.

What happens to profit generated?
Profits generated can be directed in a number of ways:
1. Your personal tuition account for next year
2. The tuition account of another LMC family for the next year
3. The Parish of your choice
4. Other (contact Business Office)
5. LMC general operating fund

How do I place a SCRIP Order?
SCRIP is ordered on Mondays. Place your order in one of 4 ways:

1. Send your order and payment to school with your child
2. Call in your order at 983-5529
3. Fax your order at 983-5520
4. Mail your order and payment to the LMC Business Office at 915 Pleasant St.
   St. Joseph, MI  49085

Orders received by 8:30 a.m. on Monday are ready for distribution on Thursday.

What is a standing SCRIP order?
For those customers who know they will be using a certain amount of SCRIP, (Bi-weekly or monthly) we can create a standing order. When you have a standing order, all you do is send your payment and your order will automatically be sent to you. Orders can be changed at any time by notifying the office at 983-5529.

Can family and friends purchase SCRIP and credit my account?
Yes! Just have your family and friends fill out a SCRIP profit sharing enrollment form and attach it to their first SCRIP order. (These forms are available at the Business Office.)

Putting off trying SCRIP?
We welcome all orders big or small. Just try ordering a small amount of SCRIP for your favorite grocery store, restaurant or gas station.

If you have any questions call 983-5529.
SCRIP Earnings Time Period
4/1/2022 through 3/31/2023

Family Name _____________________________________________________________

Last                                             First

Address ____________________________________ City ______________State ______ Zip_______

Daytime Phone # ___________________ Evening Phone # ___________________

Direct my 100% credit to (Check one):

(   ) My Personal 2023/2024 Tuition Account

(   ) 2023/2024 Tuition Account of the ________________________Family

(   ) Parish _____________________________

(   ) Other (Please contact SCRIP office regarding eligible recipients)

(   ) LMC General Operating Fund

You may re-direct your credit at any time by signing and dating another enrollment form available through the Business Office.

Signature:_____________________________________________           Date:_______________________

Future Families Only:  Complete this section if your first child is not yet enrolled in Lake Michigan Catholic Schools.

Projected Date of Enrollment:__________________  Child’s Name:________________________

All credits generated will be held by the Lake Michigan Catholic SCRIP Profit Sharing Program for future tuition payments. Credits will be applied to tuition due upon your 1st child being registered in the school. Should the child not be enrolled in the LMC System, all credits generated will be directed to the LMC General Operating Fund.
**Scrip Order Form**  
**Lake Michigan Catholic Schools**  
915 Pleasant St. Joseph  983-5529   Fax 983-5520

**DATE:** ________________

**Name:**  ___________________________________

**Address:**  ___________________________________

**City/Zip:** _______________________________________

**Home Phone:** _____________  **Work:** _______________

I will pick up my order at:

**RESTAURANTS Cont.**

<table>
<thead>
<tr>
<th>Business Name</th>
<th>Profit</th>
<th>Denom</th>
<th>Quant</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subway</td>
<td>6%</td>
<td>$10.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taco Bell</td>
<td>5%</td>
<td>$10.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Texas Roadhouse</td>
<td>8%</td>
<td>$25.00</td>
<td></td>
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</tr>
<tr>
<td>TGI Fridays</td>
<td>9%</td>
<td>$25.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wendy’s</td>
<td>4%</td>
<td>$10.00</td>
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**GAS, CAR WASHES, Oil Changes**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>BP</td>
<td>1.5%</td>
<td>$50.00</td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td>Exxon/Mobil</td>
<td>1%</td>
<td>$50.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marathon</td>
<td>3%</td>
<td>$100.00</td>
<td></td>
<td>$25.00</td>
</tr>
<tr>
<td>Marathon</td>
<td>3%</td>
<td>$100.00</td>
<td></td>
<td>$250.00</td>
</tr>
<tr>
<td>Pri-Mart/Citgo</td>
<td>2%</td>
<td>$10.00</td>
<td></td>
<td>$25.00</td>
</tr>
<tr>
<td>Shell</td>
<td>1.5%</td>
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<td>Shell</td>
<td>1.5%</td>
<td>$100.00</td>
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<td>$100.00</td>
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<tr>
<td>Lakeshore/Napier Shell</td>
<td>5%</td>
<td>$40.00</td>
<td></td>
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</tr>
<tr>
<td>Sparkle Car Wash &amp; Quick Lube. Cannot be used with other discounts</td>
<td></td>
<td></td>
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<tr>
<td>Speedy</td>
<td>1.5%</td>
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**GROCERY STORES**

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</tr>
</thead>
<tbody>
<tr>
<td>GFS</td>
<td>4%</td>
<td>$25.00</td>
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</tr>
<tr>
<td>Meijer</td>
<td>3%</td>
<td>$25.00</td>
<td></td>
<td>$50.00</td>
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<tr>
<td>Martin’s</td>
<td>4%</td>
<td>$50.00</td>
<td></td>
<td>$100.00</td>
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<tr>
<td>Roger’s Foodland</td>
<td>5%</td>
<td>$25.00</td>
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<td>Roger’s Foodland</td>
<td>5%</td>
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<td>$100.00</td>
</tr>
<tr>
<td>Wal-Mart/ Sam’s Club</td>
<td>2.5%</td>
<td>$25.00</td>
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<td></td>
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<tr>
<td>Wal-Mart/ Sam’s Club</td>
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<td>$50.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wal-Mart/ Sam’s Club</td>
<td>2.5%</td>
<td>$100.00</td>
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</table>

**Movies**

<table>
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<th>Denom</th>
<th>Quant</th>
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</thead>
<tbody>
<tr>
<td>AMC Theatre’s</td>
<td>8%</td>
<td>$25.00</td>
<td></td>
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</tr>
<tr>
<td>Celebration Cinema</td>
<td>4%</td>
<td>$10.00</td>
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<td></td>
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</table>

**Total Front Page** $  
**Total of Back Page** $  
**Total of Order** $  

**Check #_____  CASH _____ Portal _____**  
**Orders Received Monday Morning By 8:30 AM will be ready for pickup by Thursday.**
<table>
<thead>
<tr>
<th>Business Name</th>
<th>Profit</th>
<th>Denom</th>
<th>Quant</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Aeropostale</td>
<td>10%</td>
<td>$25.00</td>
<td></td>
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</tr>
<tr>
<td>Ace Hardware</td>
<td>4%</td>
<td>$25.00</td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td>Advanced Auto Parts</td>
<td>7%</td>
<td>$25.00</td>
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<td>$100.00</td>
</tr>
<tr>
<td>Amazon.com</td>
<td>2.25%</td>
<td>$25.00</td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td>American Eagle</td>
<td>10%</td>
<td>$25.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B Dalton/Barnes &amp; Noble</td>
<td>8%</td>
<td>$10.00</td>
<td></td>
<td>$25.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td>Bath &amp; Body</td>
<td>12%</td>
<td>$10.00</td>
<td></td>
<td>$25.00</td>
</tr>
<tr>
<td>Bed Bath &amp; Beyond</td>
<td>7%</td>
<td>$25.00</td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td>Best Buy</td>
<td>4%</td>
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<tr>
<td>Burlington</td>
<td>8%</td>
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<tr>
<td>Cabela's</td>
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<tr>
<td>Childrens Place</td>
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<td>$25.00</td>
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<td></td>
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<tr>
<td>Claire's</td>
<td>9%</td>
<td>$10.00</td>
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</tr>
<tr>
<td>CVS Pharmacy</td>
<td>6%</td>
<td>$25.00</td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td>Dick's Sporting Goods</td>
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<td>Dunham's</td>
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<tr>
<td>Express</td>
<td>10%</td>
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<tr>
<td>Famous Footwear</td>
<td>8%</td>
<td>$25.00</td>
<td></td>
<td>$25.00</td>
</tr>
<tr>
<td>Finish Line</td>
<td>10%</td>
<td>$10.00</td>
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<tr>
<td>Gamestop</td>
<td>3%</td>
<td>$25.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gap/Old Navy/B. Rep</td>
<td>14%</td>
<td>$25.00</td>
<td></td>
<td>$100.00</td>
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<td>Great Clips</td>
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<td>$25.00</td>
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<tr>
<td>Hannapel</td>
<td>5%</td>
<td>Any Amount</td>
<td></td>
<td></td>
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<tr>
<td>Home Depot</td>
<td>4%</td>
<td>$25.00</td>
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<td></td>
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| For additional participating retailers not listed, please visit [www.glscrip.com](http://www.glscrip.com)

T:\Scrip Inf0\[Scrip Form (to edit).xls]Sheet1
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