



2020-2021 RE-ENROLLMENT FORM

ST. JAMES SCHOOL

SCHOOL OFFICE only
Registration Fee Received: _____
Check # _____
Check Amt _____
Date _____
Initials _____

STUDENT/FAMILY INFORMATION

(FIRST NAME)	(LAST NAME)	(ADDRESS)	(GRADE /PRE-K PROGRAM ENTERING)	(MALE/FEMALE)	(DATE OF BIRTH)
(FIRST NAME)	(LAST NAME)	(ADDRESS)	(GRADE /PRE-K PROGRAM ENTERING)	(MALE/FEMALE)	(DATE OF BIRTH)
(FIRST NAME)	(LAST NAME)	(ADDRESS)	(GRADE /PRE-K PROGRAM ENTERING)	(MALE/FEMALE)	(DATE OF BIRTH)
(FIRST NAME)	(LAST NAME)	(ADDRESS)	(GRADE /PRE-K PROGRAM ENTERING)	(MALE/FEMALE)	(DATE OF BIRTH)

Father/Guardian:

Name: _____
 (TITLE) (FIRST) (LAST)

Address: _____
 (STREET) (CITY) (ZIP)

Phone: _____
 (HOME) (MOBILE)

Email: _____

Relationship to Student: _____

Employer: _____ Phone: _____

Occupation: _____

Marital Status: _____

Mother/Guardian:

Name: _____
 (TITLE) (FIRST) (LAST)

Address: _____
 (STREET) (CITY) (ZIP)

Phone: _____
 (HOME) (MOBILE)

Email: _____

Relationship to Student: _____

Employer: _____ Phone: _____

Occupation: _____

Marital Status: _____

If divorced/separated, is there joint custody? Yes No If No, are visitation rights permitted to non-custodial parent? Yes No

Student lives with: (select all that apply) Mother Father Grandparent Guardian Other _____

MEDIA RELEASE

I grant permission to use my child's image and/or name in print, electronic, or digital format for school publication, publicity, and website. (select one) Yes No

EMERGENCY CONTACTS (Non-Parent or Non-Guardian)

(NAME)	(DAYTIME PHONE)	(RELATIONSHIP)
(NAME)	(DAYTIME PHONE)	(RELATIONSHIP)

Please include the attached 2020-2021 Financial Contract and include your deposit I order to complete your re-enrollment. Make check/money order payable to St. James School.

SIGNATURES

I hereby certify that all of the above information is accurate and that my child and I agree to abide by the policies and procedures of the school handbook including the tuition policy.

Parent/Guardian _____ Date _____ Parent/Guardian _____ Date _____

Our Catholic schools admit students without regard to race, creed or color.

(Continued on other-side/next page,,)



2020-2021 Financial Contract Current Families

50 Harvey Place * Stratford CT 06615 * (203) 375-5994 * www.stjamesstratford.org

Parent/Guardian (s) Full Name: _____

Full Address (street/city/zip): _____

Home Phone: _____

Cell Phone: _____

Email: _____

Student(s):

_____ (name)	_____ (grade in fall 2020)	_____ (name)	_____ (grade in fall 2020)
_____ (name)	_____ (grade in fall 2020)	_____ (name)	_____ (grade in fall 2020)
_____ (name)	_____ (grade in fall 2020)	_____ (name)	_____ (grade in fall 2020)

TUITION RATES 2020 – 2021: CHECK ALL THAT APPLY (PRE-CHECKED ARE NOT OPTIONAL)

KINDERGARTEN – GRADE 8

<input type="checkbox"/> \$ 6,850	1 Child	<input type="checkbox"/> \$3,658	After School Program	Total Tuition including After School	
<input type="checkbox"/> \$11,099	2 Children	<input type="checkbox"/> \$6,585		\$10,508	
<input type="checkbox"/> \$14,433	3 Children	<input type="checkbox"/> \$9,877		\$17,684	
<input type="checkbox"/> \$18,731	4 Children	<input type="checkbox"/> \$13,170		\$24,220	
<input type="checkbox"/> \$21,086	5+ Children	<input type="checkbox"/> \$16,462		\$31,901	
				\$37,548	

After School Notes:

- \$50 family registration fee is required annually.
- 10% family discount on multiple child families.
- Check box under the After School Program to pay for After School through FACTS.

PRESCHOOL PROGRAMS

3-Day and 5-Day Options: Open to Both PK3 & PK4

<input type="checkbox"/> \$3,398	3-Day Morning Program (M/W/F)	Program Hours	8 am–11:30 am
<input type="checkbox"/> \$4,969	3-Day Full Day Program (M/W/F)		8 am –2 pm
<input type="checkbox"/> \$4,859	5-Day Morning Program		8 am–11:30 am
<input type="checkbox"/> \$6,330	5-Day Full Day Program		8 am –2 pm

Extended Options: Open to PK-4 Year Program Only

<input type="checkbox"/> \$8,627	3-Day Extended Day Program	8am – 5:30 pm
<input type="checkbox"/> \$10,288	5-Day Extended Day Program	8am – 5:30 pm

ADDITIONAL FEES & OBLIGATIONS

- | | | |
|---|--|---|
| <input type="checkbox"/> \$100 Early Bird Tuition Deposit if re-enrollment form received by 1/31/2020 | <input checked="" type="checkbox"/> 30 Service Hours or \$300 per year. Requirement waived if you chair a fundraiser (August – June 1 st). You may elect to pay outright. Make a selection ⇒ | <input type="checkbox"/> Yes, I/We will Volunteer Bill my FACTS account \$300 |
| <input type="checkbox"/> Or \$300 Tuition Deposit for re-enrollment forms received 2/1/2020 or later | | |
| <input type="checkbox"/> \$130 Graduation Fee (for 8 th Grade only) | | |
| <input checked="" type="checkbox"/> Sell/Buy \$150 in Raffle Tickets for Annual Raffle (Nov.-Jan.) | | |

PAYMENT OPTIONS & INFORMATION: St. James School works with FACTS Management to process tuition. Each family must set-up an account. Payments is by automatic deduction from checking/savings or via credit/debit (with a convenience fee added by FACTS). Declined payment fees are also applied. Please select 1 option below:

- Plan 1: One Payment on July 1, 2020. There is NO FACTS administrative Fee for this option.
- Plan 2: Four Installments - July 5, 2020, October 5, 2020, January 5, 2021 and April 5, 2021. There is a one-time annual administrative fee of \$45.
- Plan 3: Ten Installments - Monthly on the 5th or the 20th of the month From July – April. There is a one-time annual administrative fee of \$45.

Select monthly	<input type="checkbox"/> 5 th of month
Payment date:	<input type="checkbox"/> 20 th of month

TUITION ASSISTANCE: Financial aid applications accepted from February 1 - March 15, 2020. Families with students in grades K-8 are eligible to apply. There is an application fee of \$30. Applications are online at: <https://factsmgt.com/parents/#financial-aid>

SIGNATURES:

Parent/Guardian: _____ Date: _____ Parent/Guardian: _____ Date: _____

Please make checks payable to St. James School