

HOLY FAMILY SCHOOL SYSTEM
Family Enrollment 2019-2020

The family enrollment fee for currently enrolled families is \$75.00 if received by Friday, February 15, 2019 and \$85.00 if received any later. All newly enrolled families will be charged a \$75.00 enrollment fee. The enrollment fee must accompany this form. The fee is non-refundable after June 30, 2019, unless the family is moving out of the metro area. This enrollment fee will not be applied to tuition.

FATHER/GUARDIAN NAME _____ H/Phone _____
(Last) (First) (MI)

(Home Address) _____ Cell Phone _____

(City) (State) (Zip)
Place of Employment _____ W/Phone _____
E-mail Address _____

MOTHER/GUARDIAN NAME _____ H/Phone _____
(Last) (First) (MI)

(Home Address) _____ Cell Phone _____

(City) (State) (Zip)
Place of Employment _____ W/Phone _____
E-mail Address _____

PERSON(S) RESPONSIBLE FOR TUITION PAYMENT IF DIFFERENT THAN ABOVE:

NAME _____ H/Phone _____
(Last) (First) (MI)

(Home Address) _____

(City) (State) (Zip)
Place of Employment _____ W/Phone _____
E-mail address _____ Cell Phone _____

(New families only) If you were referred to us by someone, who referred you? _____

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Previous School:

If new student, list previous school _____

If enrolling in kindergarten: Fill out all that apply

- Attended preschool at _____
- Has not attended preschool
- Attended Alternative Kindergarten (AK) at _____

Resident School District: (Check one)

____ Cedar Rapids Community _____ College Community

____ Other: (Please list) _____

Name of Neighborhood School: Elementary (K-5) _____
Middle (6, 7, 8) _____

County of Residence _____

(OVER)

Parish Affiliation: (check one)

Holy Family Catholic Parishioner:

_____ St. Jude
 _____ St. Ludmila

_____ St. Patrick
 _____ St. John XXIII

Member of Other Catholic Parish:

_____ Immaculate Conception
 _____ St. Wenceslaus

_____ Other: (please name) _____

Non-Catholic:

_____ Religious Affiliation: _____

Please list the names and birth dates of your child(ren) at the grade level they will be enrolled during the 2019-2020 school year.

Grade		Childcare Needed		STUDENT'S LEGAL NAME (First, Middle, Last)	Indicate all that apply. A=Asian, B=Black or African American, W=White, H=Hispanic, I=American Indian or Alaska Native, P=Pacific Islander	F=Female M=Male	Birthdate
		Yes	No				
PS 2	T-TH	Yes	No				
PS 3 - AM	T -TH	Yes	No				
PS 3 - AM	M-W-F	Yes	No				
PS4 -AM	M-T-W-TH	Yes	No				
PS 4 - PM	M-T-W-TH-F	Yes	No				
K	St. Jude	Yes	No				
1	St. Jude	Yes	No				
2	St. Jude	Yes	No				
3	St. Jude	Yes	No				
4	St. Jude	Yes	No				
5	LaSalle	Yes	No				
6	LaSalle	Yes	No				
7	LaSalle	Yes	No				
8	LaSalle	Yes	No				

Tuition Assistance is available for families with students entering K – 8 via FACTS Tuition Assistance and Holy Family local assistance. All families must first apply to FACTS' online application at online.factsmgmt.com/aid. All paperwork is due to FACTS by April 15, 2019.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

For Office Use Only:

DATE _____ CASH _____ CHECK # _____ RECEIPT # _____