

Registration for
St. Luke School
Preschool Program
2020-2021

This registration packet contains:

- Preschool Program Registration Form (Form A-P)
- Tuition Information Form (Form B-P)
- Tuition Payment Agreement Form (Form C-P)
- Mrs. Vondrell's Letter
- Mrs. Dodsworth's Letter
- Father Terry's Letter
- One Call Now Contact Information Sheet
- Physical Form (including immunizations-signed by physician)
- Health Screening Checklist

Please complete and return the forms below. Your registration is not complete until we receive all the necessary information.

Return:

1. Completed Preschool Registration Form (Form A-P)
2. Registration fee for each child: \$ 100.00 current families,
\$ 150.00 new families
3. Completed Tuition Payment Agreement Form (Form C-P)
4. Current custody papers, if applicable.
5. Physical Form
6. Immunization Information
7. Birth Certificate
8. Baptismal Certificate

ST. LUKE SCHOOL REGISTRATION FORM

PRESCHOOL PROGRAM

2020-2021 School Year

Please complete entire form (BOTH SIDES) and return to school office. Please print clearly

Student Information: Male () Female () Ethnicity: _____

Preschool Session: 5 FULL Days _____ 5 HALF Days _____ 3 FULL Days _____ 3 HALF Days _____

Date of Birth: ___/___/___ Birthplace: _____

Full Name: _____
Last First Middle Nickname

Address: _____
Street Address City Zip

Phone # _____ Cell Phone: _____

Email: _____ Email: _____

STUDENT LIVES WITH: () Both natural or adoptive mother and father () mother only () father only
 () mother and stepfather () father and stepmother () grandparent
 () legal guardian, not relative () Other, (explain): _____

Ohio State Law requires that the school have copies of any child custody order/decree

If student needs bus transportation: complete the Request for Bus Transportation form in this packet-

Student Religion: _____

Baptism	Date _____	Place _____	Church _____	City _____	State _____
Reconciliation	Date _____	Place _____	Church _____	City _____	State _____
1st Eucharist	Date _____	Place _____	Church _____	City _____	State _____
Confirmation	Date _____	Place _____	Church _____	City _____	State _____
RCIA/RCIC	Date _____	Place _____	Church _____	City _____	State _____

PARENT/GUARDIAN INFORMATION

Father/Guardian Full Name _____
Last First Middle

Address (if different from student above): _____

Occupation: _____ Employer: _____

Active Duty Military: Yes () No ()

Work Phone: _____ Cell Phone: _____ Religion: _____

Active St. Luke Parishioner: () yes () no Registration Date: _____

Office Use only: Birth Certificate _____ Baptismal Certificate: _____ Custody Papers: _____

Registration Fee: _____ Cash/Ck # _____ Tuition Agreement : _____ Date: _____

PRESCHOOL REGISTRATION CONTINUED

Mother/Guardian Full Name: _____

Last

First

Middle

Maiden Name: _____

Address (if different from student) _____

Street

City

Zip

Occupation: _____

Employer: _____

Active Duty Military () Yes () No

Work Phone: _____

Cell Phone: _____

Religion: _____

Active St. Luke Parishioner () Yes () No

Parish Registration Date: _____

TUITION REONSPONSIBILITY INFORMATION:

Names, addresses, daytime phone numbers

Responsible Party A

Responsible Party B

BACKGROUND INFORMATION:

My child is on an IEP or Service Plan. () Yes () No If yes, we must have a copy of the current IEP or Service Plan to complete the registration.

List, in detail, any special needs your child has or services your child is currently receiving: _____

My child is currently receiving any of the following: () Speech Therapy () Occupational Therapy () Physical Therapy

Please list any current students under your guardianship who are currently attending St. Luke School:

Student Name _____ Grade in 19-20 _____

Student Name _____ Grade in 19-20 _____

Student Name _____ Grade in 19-20 _____

How did you hear about St. Luke School/Parish? _____

Previous school information - Including complete mailing address:

Parent must complete the Records Release Request Form included in this packet

Would your child be permitted to return to the school above? () Yes () No - If no, please describe in detail: _____

Is there other information St. Luke School needs to know? _____

Parent/Guardian Signature

Registration Date

TUITION INFORMATION FORM—**2020-2021—St. Luke School****Preschool Program**

The 2020-2021 tuition for the St. Luke School Preschool Program is listed below. The tuition due amount includes a \$60.00 Activity Fee which covers the cost of all supplies, field trips, special projects, guest speakers, etc. The technology fee covers updating, replacing, and expanding our excellent technology program

A \$100.00 per student registration fee for returning families or a \$150.00 per student fee for families new to St. Luke School is due at the time of registration and is not included in the tuition amount quoted below.

TUITION PAYMENT INFORMATION

SESSION	TUITION	ACTIVITY FEE	TECHNOLOGY FEE	TOTAL DUE
5 Days, Full Day	\$4825.00	\$75.00	\$100.00	\$5000.00
3 Days (MWF), Full Day	\$2900.00	\$75.00	\$100.00	\$3075.00
5 Days, A.M. Only	\$3580.00	\$75.00	\$100.00	\$3755.00
3 Days (MWF), A.M. Only	\$2155.00	\$75.00	\$100.00	\$2330.00

- A SINGLE tuition payment is collected in-house by the parish office or by FACTS Tuition Management Service. See Method of Payment.
- MULTIPLE tuition payments are collected by the FACTS Tuition Management Service. Families choosing multiple payments must use FACTS services to make tuition payments. **See the Bookkeeper's letter explaining FACTS registration and fees. Online enrollment in the FACTS program must be completed before registration is considered complete.**

NUMBER OF PAYMENTS AND FEES

- A SINGLE tuition payment for the full amount is due by August 1, 2020. See Method of Payment. The single payment draws interest from an interest-bearing account arranged through the Archdiocese. The interest is a source of school revenue.
- MULTIPLE tuition payments for the full amount can be as follows:
 - * Semi-Annual (2 Payments): Are due on pre-arranged dates in July 2020 and January 2021. A 0.5% interest/handling fee, per-family, is added to the amount of tuition.
 - * Quarterly (4 payments): Are due on pre-arranged dates in July and October, 2020 and January and April, 2021. A 2.0% interest/handling fee, per-family, is added to the amount of tuition.
 - * Monthly (10 payments): Are due on pre-arranged dates between July 2020 and April 2021. A 3.5% interest/handling fee, per-family, is added to the amount of tuition.

Please note: As a single tuition payment per-family generates bank interest and revenue for the school over ten months, the multiple tuition payment graduated interest/handling fee per-family generates school revenue. A late invoice payment fee of \$25.00 or a declined automatic withdrawal for non-sufficient funds fee of \$30.00 is added to the amount of tuition.

METHOD OF PAYMENT

- SINGLE payment may be made to the Parish Office by mailed invoice, or to FACTS, via ACH (automatic payment) , mailed invoice, or credit card payment. When paying by credit cards to FACTS, families will be responsible for the additional 2.75% credit card fee charged by FACTS. There will be no processing or interest fees for one payment. If payment is not received by August 1, 2020, a family will be required to register with FACTS Tuition Management Service and begin multiple payments.
- MULTIPLE payments are not made to the Parish Office. Multiple payments are made through FACTS via mailed invoice or automatic withdrawal through FACTS Tuition Management Service. Credit card payments may also be made with FACTS. Families will be responsible for the additional 2.75% FACTS credit card fee per payment which is added to the tuition amount which includes the process and interest fees already in place.

INDIVIDUALS RESPONSIBLE FOR TUITION PAYMENT:

If parents/guardians live in separate households and will share in payment responsibility, please indicate the name of each parent/guardian and the amount of tuition payment responsibility for each. Each party must complete a Tuition Payment Agreement Form. Additional forms are available online and in the school office. Each party is responsible for their own fees charged by FACTS. One parent/guardian must be a parishioner and qualify to receive the parishioner tuition discount in order for each parent/guardian in a separate household to receive the parishioner tuition discount.

TUITION PAYMENT AGREEMENT:

Return the Tuition Payment Agreement Form (Form "C-P") with the registration form ("A-P") and the registration fee. Registration is not complete until these items have been completed and submitted.

TUITION ASSISTANCE and DISCOUNTS

Active, contributing parishioners are given priority to fill Preschool openings

Tuition assistance is not offered to our preschool students.

The Parishioner Discount and other School Initiatives are not offered to our preschool students.

TUITION REFUND:

Families who withdraw a student to relocate outside of the area served by St. Luke may receive a tuition refund. School records are released only after tuition and/or other financial obligations are satisfied.

**SAINT LUKE SCHOOL
PRESCHOOL PROGRAM
TUITION PAYMENT AGREEMENT FORM
2020-2021**

PARENT FULL NAME: _____

- More than one family member (separate households) will share responsibility for tuition payments. Registration is not complete until all responsible parties have completed their portion of the registration packets.

Please designate the number of students for each session:

_____ Full-Day, 5 Day Program (\$5000.00) _____ Half-Day, 5 Day Program (\$3755.00)
 _____ Full-Day, 3 Day Program (MWF) (\$3075.00) _____ Half-Day, 3 Day Program (MWF) (\$2330.00)

NUMBER OF TUITION PAYMENTS AND FEES

- ONE PAYMENT: I/we agree to pay tuition, in full, on or before August 1, 2020. Check one**
- Send a bill from the Parish Office (payable by check or cash only)
 I will pay through FACTS by setting up an account by July 1, 2020
- TWO PAYMENTS: I/we agree to pay tuition, in full in two installments on pre-arranged dates in July 2020 and January 2021. Check one.**
- Mailed Invoice from FACTS Automatic Withdrawal from FACTS
- FOUR PAYMENTS I/we agree to pay tuition and fees , in full, in four installments on pre-arranged dates in July and October, 2020, and January and April, 2021. Check one.**
- Mailed invoice from FACTS Automatic Withdrawal from FACTS
- TEN PAYMENTS: I/we agree to pay tuition and fees, in full, in ten installments on pre-arranged dates between July 2020 and April 2021. Check one.**
- Mailed invoice from FACTS Automatic Withdrawal from FACTS

FACTS accepts Visa, Discover, Mastercard and American Express when paying via invoice. A 2.85% fee will be added in addition to any fees incurred by multiple payments.

METHOD OF MAKING TUITION PAYMENTS THROUGH FACTS - CHOOSE ONE:

_____ I am not currently enrolled online with FACTS, but I will enroll online by July 1, 2020. If I have not set up an account with FACTS by July 1, 2020, I understand that the Parish Office will assist me in setting up an account.

_____ I am currently enrolled online with FACTS and will continue to control my account online. I understand that if I do not make changes by July 1,2020, my account will rollover with the same payment preferences.

_____ Signature of Parent/Guardian

Address of Responsible Party: _____

March 2020

Dear Parents,

Welcome to preschool at St. Luke School. Saint Luke School began with students in grades 5-8 and gradually added grades as the Beaver Creek community grew. There have been many inquiries for a preschool program over the years and we were finally able to add this program to our school community this year. It has been a very successful first year for our youngest members and it has been such a joy to watch them grow and prepare for kindergarten.

Why choose to enroll your child at Saint Luke Pre School? Our preschool program is based on teaching our little ones to love God, each other, and to spread that love to the community. We begin and end our day with prayer and include weekly prayer services focusing on liturgical themes. In the area of academics, we focus on personal and social development, cognitive and language skills as well as fine and gross motor abilities. We provide a safe / secure environment, and we invite and welcome parental and family involvement. Students have Fine Arts on a weekly basis with certified teachers and work together with you to make sure your child grows and develops in independence as well as learning to meet their own needs.

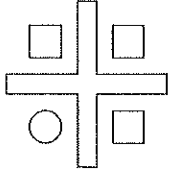
St. Luke Preschool is the beginning of your child's educational journey filled with faith and a nurturing environment. Please come and join us.

Sincerely,

A handwritten signature in cursive script that reads "Leslie".

Leslie Vondrell

Principal



St. Luke the Evangelist Catholic Church
1440 N. Fairfield Road
Beavercreek Oh 45432

March 4, 2020

Dear Parents:

Families of Saint Luke School and Preschool Program will be using the FACTS Tuition Management Service for payment of school tuition. The link for FACTS is located on the School's website at www.saintlukeparishschool.org.

FACTS will be offering two payment methods, Automatic Bank Payments (ACH) and Invoice. You will need to choose the method of payment when you register online with FACTS. Depending on the method of payment chosen you can make payments: (a) online with FACTS, (b) by personal check or (c) using your American Express, Discover, Visa card, or Mastercard. There is a 2.85% FACTS credit card processing fee for each payment.

FACTS Registration and Payments:

- **NEW FAMILIES** must complete the **School Tuition Payment Agreement** and **register online with FACTS** indicating the method of payment, either invoice or Automatic Bank Payment (ACH) and the number of payments to be made.
- **RETURNING FAMILIES** who are *previously* registered with FACTS and have been making payments through FACTS must complete the **School Tuition Payment Agreement**. If you would like to change from Invoice to ACH you will need to **go online with FACTS** to make those changes. Otherwise your FACTS Account will *rollover* for the 2020/2021 school year.
- **FOR PARENTS / GUARDIANS** that live in separate households and will share in payment responsibility, *each parent / guardian must* complete a separate **School Tuition Payment Agreement** and indicate the amount of tuition *each parent / guardian* is responsible to pay. *Each parent / guardian must* also **register online with FACTS**, if not previously registered with Facts to make payments.
- **RETURNING FAMILIES WHO** would like to change from single to multiple payments must complete the **School Tuition Payment Agreement** and register their method and payment number **online with FACTS**.
- **RETURNING FAMILIES AND NEW FAMILIES WHO** would like to make one payment have the choice to: (a) complete the **School Tuition Payment Agreement** and register their single payment **online with FACTS**, or (b) complete the **School Tuition Payment Agreement** and make their single payment at the Saint Luke Parish Office.

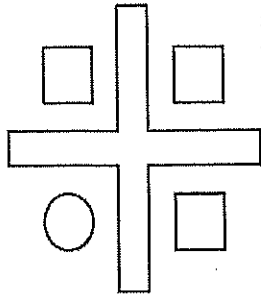
The FACTS processing fees that will be billed to your first payment are as follows:

- One Payment Invoice or ACH \$ 0.00
- Semi-Annual Invoice or ACH \$10.00
- Monthly or Quarterly Invoice or ACH \$43.00

Besides its tuition payment service, FACTS offers a *Tuition Assistance Evaluation Service* to families requesting assistance from, either or both, the Archdiocese of Cincinnati, by January 31, 2020, and St Luke Parish assistance by May 29, 2020. **All** K-8 school families can apply to receive Archdiocesan assistance. Only K-8 registered and active **parish** families can apply to receive St Luke Parish assistance. A parish family who has applied for 2020-2021 Archdiocesan assistance through the FACTS *Tuition Assistance Evaluation Service* does not have to reapply for Saint Luke Tuition assistance. Parish families will be notified of 2020-2021 St Luke Parish assistance on or about June 30, 2020.

Please remember – you have not registered until you have completed: the TUITION AGREEMENT FORM C (K-8), or FORM C-P (Preschool), FIGURE YOUR TUITION FORM E, (K-8), and completed any FACTS online payment registration process necessary. If I can further assist you in choosing your tuition payment option, or with your Facts registration and tuition aid, please call me at 937-426-1733 extension 207.

Laurie Dodsworth
Tuition Accounts/Bookkeeper



SAINT LUKE THE EVANGELIST
1440 NORTH FAIRFIELD ROAD
BEAVERCREEK, OH 45432

March 2020

Dear Pre-School Program Parents:

Your pre-school program enrollment decision offers something to your child that he/she cannot get elsewhere: a Gospel-value faith formation, a Catholic identity, and quality in an educational opportunity and resource. It is an investment in the foundation of your child's future academic and character development.

Families like yourselves join with Saint Luke School's mission to raise up responsible, self-reliant future adults who are Christ-centered and prepared for a twenty-first century world. A commitment to such quality and value is not inexpensive for parents, and pre-school faculty and the parish overall who sacrifice with pre-school families in a shared endeavor.

Keeping the 2020-2021 tuition cost as-low-as possible for families, and maintaining and promoting the academic excellence of the curriculum are complementary goals. Funding, however, cannot substitute for, or supersede, your personal commitment and participation in all pre-school efforts.

As a product of Catholic schools, I cherish what my parents and my parish made possible for me. As a pastor now, I offer my personal and our parish support to your efforts for your child.

**Reverend Terrance L. Schneider
Pastor, Saint Luke the Evangelist**

One Call Now Roster Information

Date: _____

Please complete the information below. This is the information that will be used to contact you with important information. *This does not require mandatory participation, but is very helpful in communication information.* Please be sure to regularly update your contact information using the website: www.onecallnow.com. You may add phone numbers and emails beyond what is listed here. You cannot delete or change existing information, we must do that in the office.

Student(s) Name(s)/Homeroom(s):

_____/_____/_____

_____/_____/_____

Home phone: _____

Daycare phone: _____

Mother's Information

Name: _____

Cell phone: _____

Work phone: _____

Home email: _____

Work email: _____

Other email: _____

Father's Information

Name: _____

Cell phone: _____

Work phone: _____

Home email: _____

Work email: _____

Other email: _____

BEAVERCREEK CITY SCHOOLS
 3040 Kemp Road
 Beaver Creek, OH 45431

Child's Name: _____ Male/Female: _____
 Child's Birthdate: _____ Parent/Guardian: _____

PHYSICAL EXAMINATION TO BE FILLED OUT BY PHYSICIAN
 Beaver Creek Board of Ed requirements for Kindergarten, and New 1st Graders

Height/Weight _____
 BP/Pulse _____
 Eyes/Vision _____
 Ears/Hearing _____
 Hair/Scalp _____
 Nose/Throat _____
 Teeth/Gums _____
 Skin _____
 Lungs _____
 Heart _____
 Abdomen _____

ALLERGIES: _____

 ALLERGY RESTRICTIONS: (If allergies require restrictions or alteration of diet, we need a signed physician's order on file.)
 CURRENT PRESCRIBED MEDICATIONS: _____

 Any Significant Diagnosis: _____

IMMUNIZATIONS

It is extremely important that all dates are correct, up-to-date, and written clearly.

DPT	_____	_____	_____	_____	_____
Td	_____	_____	_____	_____	_____
Polio	_____	_____	_____	_____	_____
OPV	_____	_____	_____	_____	_____
IPV	_____	_____	_____	_____	_____
MMR	_____	_____	_____	_____	_____
Hep B	_____	_____	_____	_____	_____
Varivax	_____	_____	_____	_____	_____
Hep A	_____	_____	_____	_____	_____
Exemption Medical <input type="checkbox"/>				Chicken Pox - Natural disease <input type="checkbox"/> Date: _____	
				Other: _____	
				Other <input type="checkbox"/> _____	

This is to certify that I have examined this child on _____ and have found that:
 Date

- she/he has had the immunizations required by the State Department of Health for students, or is to be exempted from these requirements for medical or other reasons.
- based upon the medical history and physical condition at the time of examination, this child is free from apparent communicable disease, and is in suitable condition for enrollment in school.

 Physician's Signature

 Date

Dr.'s Stamp _____
 Telephone Number _____
 Fax Number _____

BEAVERCREEK CITY SCHOOL DISTRICT
 Pupil Services Department
 3040 Kemp Road
 Beavercreek, OH 45431
 Phone: 458-2414 Fax: 458-2432

STUDENT HEALTH SCREENING CHECKLIST

(Use with all preschoolers, kindergartners and new first graders.)

Please complete the form below in order to help the school staff to better understand your child. Place a check beside items which describe your child most of the time.

Child's Name _____ Date of Birth _____
First Middle Last Month/Day/Year

Nickname (if any): _____

Father's Name _____ Mother's Name _____
First Last First Last

With whom does child live? _____
Name Relationship

Address _____ Home Phone _____

Who is this child's legal guardian? _____

Below, please list this child's brothers and sisters (if any):

Name	Birth year	Gender
1. _____ <small>School Attending:</small>		
2. _____ <small>School Attending:</small>		
3. _____ <small>School Attending:</small>		

DEVELOPMENTAL HISTORY

1. Did the mother have any unusual physical or emotional illnesses during this pregnancy? ____ Yes ____ No
2. How old was the mother when this child was born? _____
3. Was the infant born full term? ____ Yes ____ No If not, how early or late? _____
4. What was the infant's birth weight? _____
5. Did the infant have any sickness or problems while in the nursery? ____ Yes ____ No
6. If yes to above, please briefly explain: _____
7. Please give the approximate age at which this child did the following:
 - Walked alone _____
 - Was toilet trained _____
 - Spoke in sentences _____
 - Dressed self _____
8. How does this child's development compare to other children, such as his/her playmates or siblings? Check Box,
 - About the same
 - Slower
 - Faster

*** OVER ***

DEVELOPMENTAL: Please check applicable items listed below:

- Plays well with other children
- Prefers to play alone
- Gets along well with adults
- Is shy
- Shares willingly
- Has temper tantrums
- Has a good appetite
- Eats a variety of foods
- Has some specific fears
- Specific Fear: _____
- Has a good attitude toward entering school
- Dresses self
- Attended Preschool - How Long: _____
- Where: _____

- Tires easily
- Is not toilet trained
- Sucks thumb
- Talks easily and willingly
- Knows full name
- Uses scissors
- Has been read to
- Reads some words
- Reads with little or no assistance
- Usually uses right hand
- Can follow simple directions
- Can put together simple puzzles
- Has speech problems

HEALTH CONDITIONS - Please check all that apply:

- Abnormal spinal curvature (scoliosis, etc.)
- Allergies or hay fever
- Anemia
- Arthritis
- Asthma or wheezing
- Bedwetting at night
- Behavior problem
- Birth or congenital malformation
- Cancer, type: _____
- Chicken pox
- Chronic diarrhea or constipation
- Concern about relationship with siblings or friends
- Cystic fibrosis
- Diabetes
- Ear Problems
- Eczema
- Emotional problems
- Eye problems, poor vision
- Frequent headaches

- Frequent skin infections
- Frequent sore throat infections
- Heart disease, type _____
- Hepatitis
- Kidney disease, type _____
- Measles ("old fashioned" or "ten day")
- Meningitis or encephalitis
- Multiple ear infections (3 or more)
- Mumps
- Near-drowning or near-suffocation
- Nervous twitches or tics
- Poisoning
- Rheumatic fever
- Seizures or epilepsy
- Sickle cell disease
- Stool soiling
- Toothaches or dental infections
- Urinary tract infection
- Wetting during day

ALLERGIES: Please list and describe allergies or reactions to:

Medicines/drugs _____
 Foods/plants/animals/other _____
 Recommended treatment if allergy is severe _____

INJURIES AND ILLNESSES: Please list any severe injuries or illnesses:

Injuries/Illnesses	Age of Child	If Hospitalized (check)

ADDITIONAL INFORMATION:

What medications are given daily? _____
 What medications are given frequently, but not daily? _____

***** PLEASE NOTE:** In order to administer medication at school, there must be a Beaver Creek Schools Medication form on file.

This child is usually: very active _____ normally active _____ rather inactive _____

Do you have any concern about how your child gets along with other children? _____

Completed by: _____

Relationship to Child: _____

Today's Date: _____

Thank you for your cooperation.