



SCHOOL REGISTRATION FORM

ST. MICHAEL'S SCHOOL – CRANFORD, NJ

Registration for the 2009 — 2010 Academic Year

Amount enclosed: \$ _____ Check # _____ Cash Charge

Please print or type all information:

Parent/Guardian Information:

Person to be billed (if different):

Name _____

Name _____

Address _____

Address _____

City, State Zip _____

City, State Zip _____

() _____

() _____

Home phone _____

Home phone _____

() _____

() _____

Work phone _____

Work phone _____

Email address _____

Email address _____

Student Name:

Grade level:

Pre-K3 / Pre-K4 (Select one)

- 1. _____
- 2. _____
- 3. _____
- 4. _____

- A.M. Full Day
- A.M. Full Day
- A.M. Full Day
- A.M. Full Day

Select the tuition rate that applies (use checkbox):

Parish Rate This rate applies if at the time I register my child(ren) at St. Michael's, I am a registered parishioner of St. Michael's Parish." To be eligible for this rate, I must contribute a minimum of \$500 through **regular** and **active** use of the church envelope system during the year ending December 31, 2008 and continuing thereafter. It is also necessary to sign and return the "Parent Agreement" with the Registration form.

Envelope number: _____

Parish Rate (Neighboring parish) This rate applies if at the time I register my child(ren) at St. Michael's School, I am a registered parishioner of a neighboring parish that does not have a school. To be eligible for this rate, I must provide a letter from the pastor of the named parish acknowledging willingness to pay the tuition subsidy, that is, the difference between the parish rate and the non-parish rate.

Name of parish: _____ **City:** _____

Non-Parish Rate This rate applies if I am not a St Michael's parishioner or if I am a parishioner and choose to pay the non-parish rate.

Acknowledgement:

I (We), the undersigned, have read the accompanying papers as they relate to the registration of my (our) child(ren) at St. Michael's School. It is understood that I (we) accept all financial obligations which result from my (our) child(ren) attending St. Michael's School, including a family fundraising commitment of \$400. Failure to do so will result in my (our) child(ren) being dismissed from the school.

Parent or Guardian Signature _____

Date _____