



2011-2012

Dear Parents,

Saint Joseph Regional School and all our Catholic Schools in the Diocese of Manchester are conducting our Re-registration process.

After our In-house Re-registration process is completed, we will begin processing applications for admissions of new students. Inquiries and individual tours have been going on, and Open Houses occurred during Catholic Schools' Week.

Early registration is very important to the school in balancing our final budget figures and is important to present families in order to secure their child's space, as our classes are growing and we have a maximum of 24 students per grade.

Saint Joseph Regional School is Blessed to be in such a positive position during these difficult economic times because of:

- ❖ Dedicated, qualified faculty/staff working together to provide a Christ-centered academic atmosphere for our students to pray, grow, learn and achieve.
- ❖ Involved and supportive school community.
- ❖ Funds to offer financial assistance - Requests filed with FACTS Tuition Aid & Grants by April 15<sup>th</sup> will be determined by April 30<sup>th</sup>.
- ❖ Consistent and growing student body.
- ❖ Well-maintained facility.
- ❖ Updated materials and educational tools.

We are committed to offering an affordable Catholic Education to all who desire to attend Saint Joseph Regional School. Our Finance Committee members, Pastor, and Administration are dedicated to balancing the budget with an increase of 3% to all families' tuition, and continued tuition assistance where needed. This will be done while maintaining our present programs, classes and faculty.

**A quick return of your registration form will be rewarded by a \$50 savings/child. A non-refundable deposit fee of \$150.00/child is required.**

If you have any questions or concerns, please feel free to call or come in and meet with me.

With gratitude and prayers,

Sister Laura Della Santa, R.S.M.  
Principal



(For office Use Only)

Date of Application: \_\_\_\_\_  
Birth Certificate: \_\_\_\_\_  
Baptism Certificate: \_\_\_\_\_

Immunization Record: \_\_\_\_\_  
Registration Fee: \_\_\_\_\_  
Previous School Records: \_\_\_\_\_  
Date of First Entrance: \_\_\_\_\_

**RE-REGISTRATION FORM**

**All information with an \* is required. Fill in the following only if there are changes.**

\*CHILD'S NAME: \_\_\_\_\_ F\_\_ M\_\_ \_\_\_\_\_  
First Middle Last Name to be used by teacher Entering Grade

\*ADDRESS: \_\_\_\_\_  
Street City/Town Zip Code

\*\_\_\_\_\_ Our family qualifies for the Catholic Diocesan Sponsored Rate; as our church contributes financially to Saint Joseph Regional School (All Catholic Churches in the Diocese of Manchester.) We are registered active members and financially support \_\_\_\_\_ Parish, located in \_\_\_\_\_.

\*\_\_\_\_\_ Our family qualifies for the Regular Tuition Rate, as our place of worship is not a financial contributor to Saint Joseph Regional School.

\*Please check the form of payment you will use: **Annually** \_\_\_\_\_ **F.A.C.T.S. Monthly** \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
Street Town/City State Street Town/City State

HOME PHONE: \_\_\_\_\_ E-Mail \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ E-Mail \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ BUSINESS ADDRESS: \_\_\_\_\_  
Street Street

City/Town State City/Town State

BUSINESS PHONE: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

STUDENT LIVES WITH: \_\_\_\_\_  
First Name Last Name Spouse's Name

CHILD'S HOUSEHOLD INCLUDES: (Please list all relations living in the home.) \_\_\_\_\_

SCHOOL DISTRICT FISCALLY RESPONSIBLE FOR STUDENT (i.e. SAU#29): \_\_\_\_\_

STUDENT IS BUSSED: \_\_\_ No \_\_\_ Yes, \_\_\_ A.M. & P.M., \_\_\_ A.M. Only, \_\_\_ P.M. Only, Bus Name: \_\_\_\_\_

NON-BUSSED STUDENT'S MODE OF TRANSPORTATION TO SCHOOL: \_\_\_\_\_

**EMERGENCY CONTACT:** Mother's Cell # \_\_\_\_\_ Father's Cell # \_\_\_\_\_

**EMERGENCY CONTACT IF PARENTS CANNOT BE REACHED:**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**HEALTH:**

CHILD'S DOCTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Street

City/Town/State

Zip Code

HOSPITAL PREFERRED IN CASE OF EMERGENCY: \_\_\_\_\_ PHONE: \_\_\_\_\_

IS CHILD PRESENTLY UNDER DOCTOR'S CARE:  Yes  No IF YES, PLEASE SPECIFY: \_\_\_\_\_

IS CHILD ON MEDICATION?  Yes  No IF YES, NAME OF MEDICATION: \_\_\_\_\_

ALLERGIES: \_\_\_\_\_

DIETARY RESTRICTIONS: \_\_\_\_\_

PHYSICAL RESTRICTIONS: \_\_\_\_\_

SPECIAL NEEDS: \_\_\_\_\_

ADDITIONAL INFORMATION: \_\_\_\_\_

**HEALTH INSURANCE INFORMATION**

CARRIER: \_\_\_\_\_ POLICY: \_\_\_\_\_ MEDICAID NO. \_\_\_\_\_

Other information you believe the school should have to ensure the health, safety, or well being of your child:

**CERTIFICATION STATEMENT – SIGNATURE REQUIRED**

I understand the student's address must be known to the school for safety reasons, for tuition and state reporting purposes. Under penalty of perjury, I declare that the information given on this s form is correct.

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date

**IMPORTANT:**

- All registrations need to be accompanied by a \$150.00 non-refundable registration fee per child.
- All new registrants need to submit a copy of Birth Certificate, Immunization Records, and Baptismal Certificate to the school.

**Saint Joseph Regional School**  
**92 Wilson Street**  
**Keene, NH 03431**

**IN-HOUSE REGISTRATION**

To ensure your child's(ren's) enrollment, please fill out the registration form for each child with \$150.00 non-refundable Registration Fee and return it to the school office.

**FINANCIAL POLICIES**

**IMPORTANT INFORMATION FOR YOUR RECORDS**

Please read the following information and file it with your other school information. The provisions contained herein are an essential part of each family's contract with the school.

**REGISTRATION FEE**

There is a non-refundable Registration Fee of \$150.00 for each student.

**PAYMENTS**

The two payment plans available to you are:

ANNUAL: \*Full tuition due by July 15<sup>th</sup>, (3% of total may be deducted as a courtesy discount.)

MONTHLY: \*Through FACTS Tuition Management Company over a period of 11 months beginning in July – May.

Tuition Policy: Our operational costs depend upon tuition and if accounts are not paid you may need to withdraw your child(ren) from school enrollment until account is paid to date. Accounts need to be up-to-date before registering for the following school year. Unfortunately balances left unpaid will need to be turned over to a collection agency.

**LATE REGISTRATIONS**

Students who are registered after the beginning of the school year will be charged according to the number of months attending. Full tuition for the month enrolled will be collected.

**SPONSORED TUITION RATE**

In order to receive the Catholic Diocesan Sponsored Tuition Rate, families must complete that part of the Registration Form. Your names will be sent to your Pastors for verification to ensure your family begins/or continues receiving the Catholic Diocesan Sponsored Rate.

**FINANCIAL ASSISTANCE**

Families seeking Financial Assistance money are required to obtain an application from the school office and submit it to F.A.C.T.S. Tuition Management for review in the first round. In order to process an application for Financial Assistance, a family must be registered for the school year. Families will be notified regarding the amount allocated as soon as possible. To ensure equal consideration of need, it is important that your request be submitted during the first round of applications reviewed and monies awarded. Please feel free to note on your registration that you wish to receive a Financial Assistance package.

**\*REFUND POLICY**

Families who withdraw their child(ren) after August 1, 2011 will be charged one-month tuition. Families who withdraw their child(ren) after the beginning of the school year will be charged a month's tuition for any portion of a month attended.

**DISHONORED CHECKS**

A \$20.00 fee will be imposed for any check not honored by the bank on which it is drawn. This service charge will be added to the regular billing statement as part of tuition.

**Saint Joseph Regional School**  
 2011-2012 Projected Tuition  
 Grades K – 8

	<u>Catholic Sponsored Rate</u>	<u>11 Monthly Payments</u>	<u>3% Discount</u>
1 Child	\$ 4,164	\$ 379	\$ 4,043
2 Children	\$ 6,508	\$ 592	\$ 6,319
3 Children	\$ 9,067	\$ 824	\$ 8,803
4 Children	\$11,339	\$1,031	\$ 11,009

	<u>Regular Tuition Rate</u>	<u>11 Monthly Payments</u>	<u>3% Discount</u>
1 Child	\$ 5,753	\$ 523	\$ 5,585
2 Children	\$ 9,588	\$ 872	\$ 9,309
3 Children	\$13,427	\$1,221	\$13,036
4 Children	\$15,688	\$1,426	\$14,688

Families eligible for the Catholic Diocesan Sponsored Rates need to fulfill the following three requirements:

- Registered members of the Catholic Church in their NH community.
- Active participants in the life of their parish or mission.
- Contributors of record in their parish.

The actual cost to educate each child is approximately \$6,500. Catholic Parish contribution and your fundraising efforts make a difference in holding tuition rates to the above amounts.

Full payment by **July 15, 2011** receives a **3% discount**, or 11 monthly payments through the automatic tuition withdrawal program, F.A.C.T.S.

Financial Scholarships are available to families who qualify for assistance.