

# Our Lady of La Salette School Registration Form 2011-2012

## Parent/Guardian Information

Mother    Father    Guardian

Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State, Zip: \_\_\_\_\_  
 Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Pager: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Work phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Religion: \_\_\_\_\_  
 Parish: \_\_\_\_\_

Mother    Father    Guardian

Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State, Zip: \_\_\_\_\_  
 Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Pager: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Work phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Religion: \_\_\_\_\_  
 Parish: \_\_\_\_\_

**Student Information** Student(s) live(s) with: \_\_\_\_\_

Name	Birth date	Grade	*Baptism	*First		Confirmation
		2011-2012		Eucharist	Confirmation	

*\*Catholic students need certificate for sacrament if other than Our Lady of La Salette Parish*

## Medical Information

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Allergies: \_\_\_\_\_  
 Medical conditions: \_\_\_\_\_ Medications: \_\_\_\_\_

## Payment Plan

FACTS Program (10 months starting June 2011)     
 One Payment (May 15, 2011)     
 Two Payments (May 15 & November 15, 2011)

With any plan and in all cases, all tuition and fees must be paid in full by March 31, 2012. No checks will be accepted for tuition and fees for the 2011-2012 school year after March 31, 2012. In the event of a withdrawal from the school, tuition will be pro-rated and refunded only for the quarters unattended. Refunds will be processed after all school property (textbooks, etc.) has been returned. Report cards and progress reports will be withheld for accounts that are not paid in full, including all tuition, registration, supervision, graduation, fundraising and latchkey fees.

I agree to pay tuition and fees: \_\_\_\_\_  
Signature Date