



For Office Use Only:

Date:  
Registration Fee:  
Tuition:

# St. Mary School, Bethel, CT

## New Student Registration 2018-19

Thank you for choosing Catholic Education - an investment that will last a lifetime!

### PROGRAM

PK-3 Half Day (9am - 12pm)	4 days (M,T,Th,F)	PK4 Full Day (9am - 2pm)	4 days (M,T,Th,F)
PK3 Full Day (9am - 2pm)	4 days (M,T,Th,F)	PK4 Full Day (9am - 2pm)	5 days (M - F)
PK3 Full Day (9am - 2pm)	5 days (M - F)	Grade: K	1 2 3 4 5 6 7 8

### STUDENT INFORMATION

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

Address: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP)

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M  F

Religion:  Catholic  Other \_\_\_\_\_ Place of Worship: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Race: \_\_\_\_\_

### SACRAMENTS (for Roman Catholics only)

Has your child received the Sacraments of Baptism:  Yes  No Reconciliation:  Yes  No Communion:  Yes  No

Baptism: \_\_\_\_\_  
(DATE) (CHURCH) (CITY) (STATE)

Reconciliation: \_\_\_\_\_  
(DATE) (CHURCH) (CITY) (STATE)

Communion: \_\_\_\_\_  
(DATE) (CHURCH) (CITY) (STATE)

### SCHOOLS PREVIOUSLY ATTENDED

\_\_\_\_\_  
(SCHOOL) (CITY) (STATE) (GRADE/S) (REASON FOR LEAVING)

\_\_\_\_\_  
(SCHOOL) (CITY) (STATE) (GRADE/S) (REASON FOR LEAVING)

### FAMILY

Father/Guardian SMS Alum \_\_\_\_\_ year \_\_\_\_\_

Mother/Guardian: SMS Alum \_\_\_\_\_ year \_\_\_\_\_

Name: \_\_\_\_\_  
(FIRST) (LAST)

Name: \_\_\_\_\_  
(FIRST) (LAST)

Address: \_\_\_\_\_  
(STREET) (CITY)

Address: \_\_\_\_\_  
(STREET) (CITY)

Phone: \_\_\_\_\_  
(HOME) (MOBILE)

Phone: \_\_\_\_\_  
(HOME) (MOBILE)

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Religion:  Catholic  Other \_\_\_\_\_

Religion:  Catholic  Other \_\_\_\_\_

Marital Status: \_\_\_\_\_

Marital Status: \_\_\_\_\_

If divorced/separated, is there joint custody?  Yes  No If No, are visitation rights permitted to non-custodial parent?  Yes  No

Student lives with: (select all that apply)  Mother  Father  Grandparent  Guardian  Other \_\_\_\_\_

### SIBLINGS If additional space is needed, please list on back

\_\_\_\_\_  
(NAME) (DATE OF BIRTH) (AGE) (SCHOOL)

\_\_\_\_\_  
(NAME) (DATE OF BIRTH) (AGE) (SCHOOL)

\_\_\_\_\_  
(NAME) (DATE OF BIRTH) (AGE) (SCHOOL)

**GRANDPARENTS** *If additional space is needed, please list on back*

(MATERNAL GRANDPARENTS)

(ADDRESS)

(EMAIL)

(PATERNAL GRANDPARENTS)

(ADDRESS)

(EMAIL)

*When you enroll your child, we enroll your family*

**MEDICAL**

Does the student have allergies, severe health issues and/or is taking medications?  Yes  No If yes, please explain \_\_\_\_\_

**OTHER INFORMATION**

Have you ever been invited to attend a PPT meeting for your child?  Yes  No If yes, please attach all relevant information

Do you have any concerns regarding your child's academic, social or emotional skills?

Home Language Survey:

When your child began to speak, what language did he/she speak? \_\_\_\_\_

What language do the parents/guardians speak to each other? \_\_\_\_\_

What language is spoken most often at home? \_\_\_\_\_

How did you hear about St. Mary School? \_\_\_\_\_

Why are you changing schools? (applicants for Grades 1 - 8 only) \_\_\_\_\_

**BEFORE CARE (Pre-K only)**

**Yes No Maybe**

**AFTER CARE (Pre-K to 8th Gr)**

**Yes No Maybe**

**EMERGENCY CONTACTS** (Non-Parent or Non-Guardian)

(NAME)

(DAYTIME PHONE)

(RELATIONSHIP)

(NAME)

(DAYTIME PHONE)

(RELATIONSHIP)

**MEDIA RELEASE**

I grant permission to use my child's image and/or name in print, electronic, or digital format for school publication, publicity, and website. (select one)  Yes  No

**REGISTRATION FEE**

\$200 New Family Registration Fee (non-refundable) payable by cash or check to *St. Mary School*

Registration is not complete until tuition payment plan is selected on FACTS; opens 2/1/18 ([www.factsmgt.com/signin/3d3h2](http://www.factsmgt.com/signin/3d3h2))

**SIGNATURES**

*I hereby certify that all of the above information is accurate and that my child and I agree to abide by the policies and procedures of the school handbook (which can be found online at [www.stmarybethelct.org](http://www.stmarybethelct.org)) including the tuition policy.*

Parent / Guardian \_\_\_\_\_

Date \_\_\_\_\_

Parent / Guardian \_\_\_\_\_

Date \_\_\_\_\_