

2010-2011 Registration Check-List

Thank you for your interest in enrolling your children in St. Leo the Great School for the 2010-2011 School year. Enclosed is our 2010-2011 Registration Packet .

Please follow instructions carefully to ensure that your registration is processed smoothly.

Page 1—Student Registration

- Read Carefully and complete all areas.
- The registration fee for EACH child is \$50 and must be paid at the time of Registration.
- **Return completed & signed form - Page 1**
- **And check payable to St. Leo the Great School for total Registration Fee Due**

Page 2—Registration Agreement

- Read Carefully and Sign where indicated.
- **Return completed and signed form - Page 2.**

Page 3—Tuition Agreement + Pages 3 a & 3 b

- Read Carefully the Tuition Requirement & Sign where indicated
- **Return completed and signed form—Page 3**

Student Information Record Sheet

- Please complete one for each child.
- **Return completed and signed form**

Permission to Release School Records

- Please complete one for each child.
- **Return completed and signed form**

Enclose Copy of Birth Certificate - *For Each Child*

Enclosed Copy of Baptismal Certificate - *For Each Child*

Contact Information:

School Questions - Mrs. Eileen Breitmeyer, School Secretary - 661-2120
- Mrs. Diane Weiss, School Principal - 661-2120

Tuition & Scholarship - Mrs. Cindy Funari, Registration & Tuition Processor - 661-1006
Cleveland Scholarship Voucher Program

Parish / Members - Jamie Vining, Rectory Secretary - 661-1006
- Rev. Russell Lowe, Pastor - 661-1006

KINDERGARTEN REGISTRATION

PARENT(S), CUSTODIAL PARENT(S), LEGAL GUARDIAN(S) INFORMATION *(print clearly)*

Name # 1	Relationship to Child
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Name # 2	Relationship to Child
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Address _____
 City/State/Zip _____

Phone Numbers: Home Phone (____) _____
 Cell Phone (name/relation) _____ (____) _____
 Cell Phone (name/relation) _____ (____) _____
 Work Phone (name/relation) _____ (____) _____
 Work Phone (name/relation) _____ (____) _____

Child Lives With: _____

If divorced or separated, please include information for other parent.

NON-CUSTODIAL PARENT INFORMATION *(if applicable)*

Name	Relationship to Child
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Address _____
 City/State/Zip _____

Home Phone	Cell Phone # 1	Cell Phone # 2	Work Phone
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<input type="checkbox"/> I am a Participating Member of St. Leo the Great	Envelope #
<input type="checkbox"/> I am a Participating Member of:	Envelope #
<input type="checkbox"/> I am a NON-Participating Parishioner or a NON-Parishioner	

CHILD TO BE REGISTERED FOR 2010-2011

Child's First Name	Child's Last Name
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Child's Date of Birth (Mo/Day/Yr)	Gender (Circle) MALE FEMALE
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PRESCHOOL your child is currently attending (or previously attended)

Name	Phone Number
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Address _____

Please specify any special needs for your child (medical, educational, etc.)

Is the student a Cleveland Scholarship & Tutoring Program Voucher Recipient? ____ Yes (check One)
 ____ 10% ____ 25%
 ____ NO

NON-REFUNDABLE \$50 REGISTRATION FEE: Date: Cash Check #
 Birth Certificate Baptismal Certificate Not Baptized

Child LAST NAME

2010 - 2011

REGISTRATION AGREEMENT

Please Carefully Read the following Regulations:

1. Our family will comply with St. Leo's Administration by supporting all rules and regulations. Full & complete cooperation of the parents with school administration in all school and parish activities is expected.
2. Our family will fully support the religion programs; including regular participation in school Liturgy, and/or participation in parish activities.
3. Our family will participate in the Holiday Pick 40 fundraiser. We can choose between selling 10 Holiday Pick 40's or paying a \$100 Technology Fee;
4. Our family will pay all of our family financial obligations promptly. We understand that students will not be allowed to begin the second semester unless all accounts are current.

In order for the registration process to begin, the following must occur:

- there must be **NO** outstanding financial balances (*unless pre-arranged with Fr. Russ Lowe*)
- Signed Registration Agreement and completed Student Registration form returned to School
- Signed Tuition Agreement must be returned to School

I/We the undersigned have read, understand and agree to the regulations stated in the Registration Agreement;

I/We further understand that no part of this Registration Agreement is optional.

Parent/Guardian (PRINT) _____ Relationship to Student(s) _____

Signature of Parent/Guardian _____ Date _____

Parent/Guardian (PRINT) _____ Relationship to Student(s) _____

Signature of Parent/Guardian _____ Date _____

Child(ren)
LAST NAME

**ALL FAMILY SHARE OF TUITION MUST BE PAID IN FULL
 BY AUGUST 11, 2010
 IN ORDER FOR YOUR CHILD/CHILDREN TO BE
 ASSIGNED TO A CLASSROOM****

PAYMENT OPTIONS

- **Check or Money Order** payable to St. Leo School. Payments may be dropped off at the School Office or the Rectory. Please label payments "Attention Tuition". Payments after June 4, 2010 should be dropped off at the Rectory or mailed to 4940 Broadview Road * Cleveland, Ohio 44109. ALL RETURN CHECKS WILL BE ASSESSED A \$15 BANK FEE.
- **Cash Payments** - Please give directly to the School or Rectory Secretary. DO NOT SEND CASH WITH CHILD - WE ARE NOT RESPONSIBLE FOR LOST MONEY
- **Credit Card Payments**—Visa, Mastercard, Discover Card are accepted at the Rectory only.
- **Student Loans**—Low interest rates are available through Unity Catholic Credit Union call (440) 886-2558

MUST BE COMPLETED AND SIGNED BY ALL PARTIES RESPONSIBLE FOR TUITION PAYMENTS

I/We am requesting that the child/children listed on the Student Registration Form be registered for St. Leo the Great School for the 2010-2011 school year. By registering, I/We understand and agree that I/We are fully responsible for all tuition payments and applicable fees. I/We have read the Tuition Schedules and understand our tuition obligations. I/We have read, understand and signed the Registration Agreement Form. I/We also understand that ALL the Family Share of Tuition and Fees must be paid in full by August 11, 2010 in order for my child/children to be assigned to a classroom. I/We further understand that by the end of the 1st semester, the Pastor and Principal will consider dropping from the enrollment any families that have delinquent Tuition and fees. I/We understand that in order for our child/children's records to be transferred to another school all Tuition, Fees and any other important requirements must be met. This includes any Cleveland Scholarship Voucher payments that have not yet been received. Any refunds due to the family will be given after all Cleveland Scholarship Voucher Checks have been signed by the recipient.

Parent/Guardian (PRINT) _____ Relationship to Student(s) _____

Signature of Parent/Guardian _____ Date _____

Parent/Guardian (PRINT) _____ Relationship to Student(s) _____

Signature of Parent/Guardian _____ Date _____

It is assumed that the Parent, Custodial Parent, or Guardian is responsible for 100% of tuition owed. If someone OTHER THAN the Parent, Custodial Parent, or Guardian will be responsible for all or any portion of tuition, please indicate below.
This Responsible Party MUST complete and SIGN the bottom portion of this agreement. Also, Copies of all Court Documents regarding responsibility for Tuition payments must accompany registration form.

Other Responsible Party (Print) _____ Relationship to Student(s) _____

Signature of Responsible Party _____ Date _____

Address _____ Phone _____

Indicate percentage of tuition responsibility _____ %*

* If percentage indicated is less than 100, Parent, Custodial Parent, or Guardian listed above assumes responsibility for remainder of tuition.
 ** Unless prior arrangements are made with Fr. Russ.

Child(ren)
LAST NAME