

CATHOLIC COMMUNITY OF WASHINGTON, IN

315 NE Third Street
Washington, IN 47501
(812)254-2883

WASHINGTON CATHOLIC SCHOOLS

REGISTRATION FORM 2009-2010 SCHOOL YEAR GRADES K—12

FAMILY NAME _____

PARISH AFFILIATION

_____ Our Lady of Hope

_____ Other Catholic Church: Location _____

_____ Non-Catholic

CURRENT FEES

_____ 1 Student - \$2,250.00

_____ 2 Student—\$3,980.00

_____ 3 or more Students- \$4,450.00

_____ 1/2 Day Kindergarten is available. Reduce your current fees by \$250.00.

_____ Non-Catholic Fee \$400.00 per student, but no more than \$750.00

_____ No Fundraising Option—\$4,000.00 per student

_____ Foreign Exchange Student—\$4,500.00

Party/Parties responsible for pay these fees and the amount each party is paying:

PARENT INFORMATION

FAMILY NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

E-MAIL ADDRESS _____ RELIGION _____

FATHER'S NAME _____ DRIVERS LICENSE # _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

EMPLOYER _____ WORK NUMBER _____

HOME PHONE NUMBER _____ CELL PHONE NUMBER _____

ADDRESS IF DIFFERENT THAN ABOVE _____

MOTHER'S NAME _____ DRIVERS LICENSE # _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

EMPLOYER _____ WORK NUMBER _____

HOME PHONE NUMBER _____ CELL PHONE NUMBER _____

ADDRESS IF DIFFERENT THAN ABOVE _____

STEP-FATHER'S NAME _____ DRIVERS LICENSE # _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

EMPLOYER _____ WORK NUMBER _____

HOME PHONE NUMBER _____ CELL PHONE NUMBER _____

ADDRESS IF DIFFERENT THAN ABOVE _____

STEP-MOTHER'S NAME _____ DRIVERS LICENSE # _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

EMPLOYER _____ WORK NUMBER _____

HOME PHONE NUMBER _____ CELL PHONE NUMBER _____

ADDRESS IF DIFFERENT THAN ABOVE _____

STUDENT INFORMATION

STUDENT NAME _____

DATE OF BIRTH _____ GRADE _____

SOCIAL SECURITY NUMBER _____ GENDER _____

STUDENT NAME _____

DATE OF BIRTH _____ GRADE _____

SOCIAL SECURITY NUMBER _____ GENDER _____

STUDENT NAME _____

DATE OF BIRTH _____ GRADE _____

SOCIAL SECURITY NUMBER _____ GENDER _____

STUDENT NAME _____

DATE OF BIRTH _____ GRADE _____

SOCIAL SECURITY NUMBER _____ GENDER _____

STUDENT NAME _____

DATE OF BIRTH _____ GRADE _____

SOCIAL SECURITY NUMBER _____ GENDER _____

STUDENT NAME _____

DATE OF BIRTH _____ GRADE _____

SOCIAL SECURITY NUMBER _____ GENDER _____

STUDENT/STUDENTS LIVES WITH:

- | | | | |
|-------|--------------------|-------|----------------------|
| _____ | FATHER/MOTHER | _____ | MOTHER |
| _____ | FATHER | _____ | MOTHER/STEP-FATHER |
| _____ | FATHER/STEP-MOTHER | _____ | GRANDPARENT |
| _____ | GUARDIAN | _____ | OTHER—PLEASE EXPLAIN |

RELIGION POLICY

Catholic families attend mass each Sunday and Holy Days of Obligation. They also support their parish with time, talent, and treasure. To avoid paying the \$400.00 per student non-catholic fee, you must support your parish.

TUITION POLICY

I have read the tuition policy and agree to the financial arrangements stated on this registration form. If I change the arrangements, it must be in writing.

SERVICE HOUR POLICY

I have read the service hour policy and understand that I owe 20 hours per student from June 1, 2009 to May 31, 2010 and that at least 10 hours per student must come from working bingo.

FINANCIAL ARRANGEMENTS

Anyone not paying in full by September 1, 2009 will be assessed a \$40.00 payment plan fee.

TOTAL AMOUNT DUE _____

I will pay using one of the following options:

_____ Payment in full by September 1, 2009 _____ Bank Plan, Fill out the Authorization Form

_____ Other—Use the space below to explain in detail how you plan to pay the balance due for the 2009-2010 school year.

AUTHORIZATION FORM

I (we) hereby authorize the Catholic Community of Washington, IN to initiate debit entries to my checking or savings account as indicated below, at the depository bank named below, and for the amount indicated below.

TYPE OF ACCOUNT: CHECKING OR SAVINGS DATE TO DEDUCT: 20TH

ACCOUNT NUMBER _____

BANK NAME AND ROUTING NUMBER _____

MONTHS TO DEDUCT _____

NUMBER OF PAYMENTS _____ AMOUNT OF EACH PAYMENT _____

FATHER'S SIGNATURE

MOTHER'S SIGNATURE