### 2020-21 Registration Form & Tuition Contract

Please print all information.

<table>
<thead>
<tr>
<th>Oldest Student Name (Last Name First)</th>
<th>Date of Birth</th>
<th>Gender</th>
<th>Race</th>
<th>Ethnicity</th>
<th>Entering Grade*</th>
<th>Tuition</th>
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<tr>
<td>1. _________________________________</td>
<td>_____________</td>
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School Attended in 2019-20 ____________________________  School Attending in 2020-21 ____________________________

**Additional Children Registering:**

2. _____________________________________  ___________  _______  ___________  Hispanic/Latino  Non-Hispanic/Latino  $ ______

School Attended in 2019-20 ____________________________  School Attending in 2020-21 ____________________________

3. _____________________________________  ___________  _______  ___________  Hispanic/Latino  Non-Hispanic/Latino  $ ______

School Attended in 2019-20 ____________________________  School Attending in 2020-21 ____________________________

4. _____________________________________  ___________  _______  ___________  Hispanic/Latino  Non-Hispanic/Latino  $ ______

School Attended in 2019-20 ____________________________  School Attending in 2020-21 ____________________________

*Race (as defined by the US Census Bureau): American Indian/Native Alaskan, Asian, Black/African American, Native Hawaiian/Pacific Islander, White, Two or More, Unknown

**Grade:** if entering Pre-K 3 or Pre-K 4, please mark which schedule your student will follow:  

- [ ] 3 Half Days (T, W, Th) or [ ] 5 Half Days
- [ ] 3 Full Days (T, W, Th) or [ ] 5 Full Days

**TUITION**

Please see attached regarding tuition schedule. REMINDER: Pre-Kindergarten is included in discount for early payment in full. If tuition is paid in full for all students on or before July 15, 2020, there is a $100 discount for the 1st student and $50 for each additional student.

I/We will pay the tuition according to the following schedule (please check one):

- [ ] One Payment - Due July 15, 2020
- [ ] Two Payments - Due July 15, 2020 and January 15, 2021
- [ ] Monthly Payments - Due 5th or 20th of each month (July 2020—June 2021)

FACTS TUITION MANAGEMENT: If payments are not made by the due date, a $50 late fee will be assessed by FACTS for each late payment.

Enrollment is conditional on having an account in good standing.
Textbooks
To: Secretary of Education, Commonwealth of Pennsylvania

I hereby request the loan of textbooks, instructional materials and auxiliary services in accordance with Pennsylvania ACTS 195/90 for my child/ren attending Diocese of Scranton Catholic Schools.

________________________  __________________________
Date                                                       Parent Signature

Public School District of Residence

Parish Membership
For ALL registrations: _______ Roman Catholic       _______ Other Catholic       _______ Non-Catholic (if no parish affiliation applies)
Parish/House of Worship _____________________________ City ___________________________

Family Information
Father’s Full Name _____________________________ Cell Phone # _____________________________ E-mail ___________________________
Mother’s Full Name _____________________________ Cell Phone # _____________________________ E-mail ___________________________
Street Address ___________________________________________ PO Box (if applicable) ____________
City __________________________________ State __________ Zip Code __________ Home Phone # _____________________________

Parent/Mother Address, if other than students

Parent’s Marital Status _____ single      _____ married      _____ separated      _____ divorced      _____ father deceased      _____ mother deceased
Child/ren live with _____ both parents      _____ mother       _____ father       _____ other: ___________________________

Is there a custody agreement in effect?      _____ Yes      _____ No      If “Yes”, a copy of the order MUST be given to the school at the time of registration and will be placed in the student’s file. Any changes to the formal agreement must be shared with the school at the time of the change.

Emergency Contact Information
Father Occupation _____________________________ Employer Name _____________________________
Work City/State _____________________________ Work Phone _____________________________
Mother Occupation _____________________________ Employer Name _____________________________
Work City/State _____________________________ Work Phone _____________________________
Additional Contact Person _____________________________ Phone __________________ Relationship to Student _____________________________

Transportation: Each school district has a different transportation form.

_____ Bus/Van       _____ Car       _____ Walker       _____________________________ is authorized for student pick up (please print full name).
### New Families Only—for your student

**Required Information:**
- Birth Certificate ______ (verified)
- Baptismal Certificate ______ (verified)
- Immunization ______ (verified)

**Pre-K Contract ______**

**Baptism Date ________________________ Church ________________________ City/State ________________________**

**First Communion Date ________________________ Church ________________________ City/State ________________________**

**Confirmation Date ________________________ Church ________________________ City/State ________________________**

**Family Registration Fee (non-refundable)**
- The non-refundable registration fee is $100.00 per family
- Students in grades 7—12 also have a $100 Retreat, Book, and Lab Fee per student, payable at registration time
- Checks should be made payable to the “Diocese of Scranton Catholic School System”

### Authorization:

*I/We have completed this form to the best of my/our ability and render the information given as truthful to the best of my knowledge. As a parent/guardian, I hereby approve this application and guarantee all financial obligations by admittance to St. John Neumann Regional Academy. I/We fully agree that my student/s and I will abide by the policies of the school and the handbook regulations of the school. I/We have read and agree to the terms as outlined in the attached fundraising commitment document ($500 per family per year) and the tuition rate schedule.*

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<th>Name (print)</th>
<th>Signature</th>
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<th>Address &amp; Phone (if different than listed in the Family Information Section)</th>
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### OFFICE USE ONLY

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<th>Check #</th>
<th>Check Amount</th>
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<th>Seat Available</th>
<th>Waiting List</th>
<th>Signature</th>
<th>Date</th>
<th>Time</th>
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