SAINT PIUS X SCHOOL

RE-REGISTRATION FOR THE 2009-2010 SCHOOL YEAR

THIS INFORMATION IS NECESSARY IN ORDER TO MAKE PROJECTIONS FOR THE 2009-2010 SCHOOL YEAR. EVERY DAY, PEOPLE CALL US REQUESTING TO PLACE THEIR CHILD IN OUR SCHOOL. WE WANT TO GUARANTEE A PLACE FOR YOUR CHILD IN SAINT PIUS X SCHOOL FOR THE 2009-2010 SCHOOL YEAR. THANK YOU FOR YOUR COOPERATION. **(Please complete one form for <u>each child</u> in Grades 1 through 8).**

Please **PRINT** the following information.

_____

(Student's last name) (Student's first name) (Student's middle initial)

_____

(Street address)

_____

(City) (State) (Zip code)

_____

(Area code-Telephone Number) (Email address)

Parent/Guardian Signature: _____

Do you intend to send your child to St. Pius X School next year? ____YES _____ NO

If NO, what school will your child attend in September, 2008? ** (Request a release form.)

_____

(Name of School)

_____

(Address of School)

****NO RECORDS WILL BE RELEASED TO ANOTHER SCHOOL UNTIL ALL TUITION AND FEES FOR THE 2008-2009 SCHOOL YEAR ARE PAID IN FULL AND A SIGNED REQUEST FOR RELEASE FORM IS COMPLETED. (Please call the office for the release form).**

<u>PLEASE RETURN THIS FORM WITH YOUR CHECK PAYABLE TO: ST. PIUS X SCHOOL.</u>

Registration Fee (Non-refundable): Paid by Check # _____ Cash $_____

Choice of Tuition Payment Plan:
_____ Annual _____ 3 Payments _____ Monthly Payment Plan

I understand that by registering my child I accept my obligation to keep my tuition payments current.