

**St. Catharine School**  
**Kindergarten Registration Checklist**

**All** registration forms, fees, and documentation must be returned to  
St. Catharine School by **Friday, February 10, 2017**

**Forms 1 – 6 are in this St. Catharine registration packet:**

- \_\_\_\_\_ (1) Diocese of Columbus Registration Form
- \_\_\_\_\_ (2) St. Catharine School Registration Form
- \_\_\_\_\_ (3) Enrollment Agreement
- \_\_\_\_\_ (4) Statement of Intent
- \_\_\_\_\_ (5) Special Needs Questionnaire
- \_\_\_\_\_ (6) Kindergarten Survey / Permission to Contact a Preschool

**In addition, the following items must be included in the returned registration packet:**

- \_\_\_\_\_ (1) Copy of Birth Certificate
- \_\_\_\_\_ (2) Copy of Baptismal Certificate (if Catholic)
- \_\_\_\_\_ (3) \$35.00 Registration Fee – non-refundable (only for **NEW** families to the main school) (Check or money order **ONLY**)
- \_\_\_\_\_ (4) Copy of any Custody-Related Court Orders
- \_\_\_\_\_ (5) Copy of Student Immunization Record
- \_\_\_\_\_ (6) \$100.00 non-refundable Tuition Deposit (Check or money order **ONLY**)  
(This fee is **PER FAMILY** and is deducted from your tuition charges)

**The following form is not due until August 23, 2017:**

(print from the "Handbook & Forms" section of the school website at [www.stcatharineschool.com](http://www.stcatharineschool.com))

- \_\_\_\_\_ Medical: Physical Examination

**PRIORITIES FOR ST. CATHARINE SCHOOL**

- I. Children of St. Catharine Parish (registered at the rectory)
  - A. Children who are five years of age by September 30
  - B. Children from families with children already enrolled
  - C. Children from families who are registered in the parish

\*\*\* Acceptance will be based on date of parish registration \*\*\*
- II. Children of non-parish families with students already enrolled in the school
- III. Children of other parishes and/or non-Catholic families may be admitted based on an interview with the principal and/or pastor.

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**For Office Use Only**

**Parent Name** \_\_\_\_\_

**Student Name** \_\_\_\_\_

**Reg. Fee** \_\_\_\_\_

**Tuition Deposit** \_\_\_\_\_