SETON CATHOLIC SCHOOL 2017-2018 EXTENDED CARE REGISTRATION FORM



PARENT/GUARDIAN (Please PRINT.)

FIRST Names:			
LAST Names:			
Phone Numbers			
Mom's Home:	Work:	Cell:	
Dad's Home:	Work:	Cell:	
Mom's Email Address:			_
Dad's Email Address:			

EXTENDED CARE RATES

WRAP-AROUND CARE (WAC) - ANNUAL TUITION for 2018-19

- Wrap-Around Care is available to all students in the Pre-School through Grade 6 programs.
- Add an AM, PM or FULL DAY WAC program to a PreK to Gr6 program to build an extended day program suitable for your schedule. *Seton offers the longest AM/PM extended day (5.5 hrs/day) in the Diocese!
- A \$100 sibling discount is available when the second & subsequent siblings are enrolled in Wrap-Around.

ATTENIO	AM WAC PROGRAM	PM WAC PROGRAM	FULL DAY WAC (AM+PM)
ATTEND	7:00am to start of AM class	2:15pm to 6:00pm	*7:00am to 6:00pm
2 Days	\$715	\$1,530	\$2,245
3 Days	\$1,075	\$2,295	\$3,370
4 Days	\$1,430	\$3,060	\$4,490
5 Days	\$1,790	\$3,825	\$5,615

- A \$150 per family, non-refundable registration fee is due at time of Wrap-Around Care (WAC) registration.
- Registrations made & paid in full prior to July 1st qualify for the \$50 "early bird" WAC registration rate.
- For single-day use (<u>PM WAC Program Only</u>), parents must purchase "WAC VOUCHERS" from the school office for \$325/10-day bundle. No registration fee is required for vouchers, but families <u>must</u> still register for the program to ensure adequate staff planning.

STUDENT INFORMATION

Last Name	First Name	M/F	DATE OF BIRTH	ALLERGIES* (YES or NO) Explain on back	K-6 th Grade (Circle Days) 2:30PM-6:00PM
			/ /		M / T / W / Th / F
			/ /		M / T / W / Th / F
			/ /		M / T / W / Th / F
			/ /		M / T / W / Th / F

PICK UP AUTHORIZATION

Phone Number:

The following people are authorized to pick my child up from extended care:			
Full Name:	_ Phone Number:		

Full Name:

Full Name:	Phone Number:

<u>Registration Information Form</u> Finance Information for 2018–2019 School Year

All information must be completed by the Financially Responsible Person (Parent/Legal Guardian).

- A nonrefundable \$150 Family School Registration Fee must be submitted with this form. Cash, check or money order only.
- Make registration checks payable to **Seton Catholic School**.
- A nonrefundable \$150 Family Wrap Around Care Registration Fee (if applicable) must be submitted with this form. Cash, check or money order only. Registrations fee <u>paid in full prior to July 1st</u> qualify for the \$50 "early bird" WAC registration rate.
- A \$35 fee will be assessed for returned checks.

1) Annual Payment:

- All families who enroll students in Seton Catholic School will be required to set up/maintain an account with FACTS.
- Upon **submission** of registration, a letter will be issued with a link to FACTS and you will then be prompted to select a preferred payment option as outlined below, if required.

Payment Plan Options Available:

* Due August 1, 2018

		* No annual fee charged			
2) Semi-Annual I	Payments:	* Due August 1, 2018 and Ja: * No annual fee charged	nuary 1, 2019		
3) Ten Monthly <u>I</u>	EFT Payments:	 * Processed each month, Au * 1st of the month * Annual fee of \$50/family of the annual fee will be changed and the school finaling 	harged by FACTS Manag rged to your account 10	ement Co.	
4) Extended Day	7 Drop-in-Slips	* \$325.00 for 10 tickets and Wrap Around Care is in s Packets available at the So	ession. Prior notice is rec	juired.	
Understanding and Agreen	nent:				
financial institution per oI understand that delinque failed. In this event, I agreeIf this is a re-registration, dependent upon completion	ecurrence. ent accounts are referred ee to pay all costs related to I understand that final va on of all financial responser with FACTS Management be shared with the follow	to a collection agency when all oth to a collection and/or legal proces lidation for registration and grade p ibilities for the current school year ent Co. prior to my child(ren) being ving person/people:	er attempts to obtain pays es. placement for the next scl g accepted at Seton Catho	ment have nool year is lic School.	
		Relation			
Signature of Financially Resp	ponsible Person:		SS#		
Relationship to Student(s) (Must be parent or legal guard	dian):			
Mailing Address:					
	Street	City	State	Zip	
Telephone: Cell Work _		zF	Home		