

Age Requirements

PreK3-call the school office for age guidelines

PreK4- child must be 4 years old on or before September 10th

Kindergarten- child must be 5 years old on or before September 10th

First Grade- child must be 6 years old on or before September 10th

Needed for Registration

Completed Registration Papers and Registration Fee

Certified Birth Certificate-(no photo copies-must have raised seal)

IMM50- Immunization record from Alabama (Blue Card)

Baptismal Certificate (if Catholic)

Transcripts from previous school (we will send for them)

Any testing/evaluations that indicate learning or behavioral concerns that could affect performance in school

Tuition Assistance

Tuition assistance is available to St. Pius X parishioners. To be considered for tuition assistance you must complete the FACTS Financial Questionnaire for evaluation by the FACTS company. The results of the FACTS evaluation will be provided to the pastor and principal for final decision regarding eligibility.

All applications for tuition assistance must be received by April 30, 2018. Applications received after the deadline may not be considered pending available funding.

Meeting with the Principal

All new students and their parents must meet with Mrs. Alvarez prior to being accepted to St. Pius X School. Please call the office to set up an appointment.

Books and Supplies

Book lists and supply lists will be posted on our website in May. We will once again offer the supply kits which will include all materials on the supply lists.

Summer Reading and Math

Students are required to complete a reading project/report and a math packet during the summer. Information on these assignments will be posted on our website in May.

Summer Reading Camp

Information and dates for our Summer Reading Camp will be posted on our website in May. This camp fulfills the summer reading requirements and includes many fun activities.

ST. PIUS X CATHOLIC SCHOOL

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<small>LAST</small> Student's Name: <small>FIRST</small> <small>MIDDLE</small>	DOB: / /	Grade Entering:
Gender <small>M</small> <small>F</small>	Religion:	Parish, if Catholic:
Student's Address:		
City/State/Zip:	Primary Phone #:	

<small>Circle One</small>				
<small>LAST</small> Mother / Step Mother / Guardian:	<small>FIRST</small>	<small>MIDDLE</small>	<small>MAIDEN</small>	
Home Phone #:	Cell Phone #:			
Place of Employment:	Business Phone #:			
Email Address:				

<small>Circle One</small>		
<small>LAST</small> Father/Step Father/Guardian:	<small>FIRST</small>	<small>MIDDLE</small>
Home Phone #:	Cell Phone #:	
Place of Employment:	Business Phone#:	
Email Address:		

Who does Student live with? <small>Both Parents</small> <input type="checkbox"/> <small>Mother</small> <input type="checkbox"/> <small>Father</small> <input type="checkbox"/> <small>Guardian</small> <input type="checkbox"/>
If divorced, does other parent have legal access to student during school hours? <small>Yes</small> <input type="checkbox"/> <small>No</small> <input type="checkbox"/>
If "No", please provide legal documentation for student's file. Date Submitted: / /

If transfer, from what school?	<small>School Name</small>
	<small>Street, City, State, Zipcode</small>
Date entering St. Pius X School:	Has your child ever been asked to leave another school? <small>Yes</small> <input type="checkbox"/> <small>No</small> <input type="checkbox"/>
If "Yes", please explain reason:	

	<small>Elementary</small>	<small>Middle</small>
What Public School District do you reside in?		

If Catholic, please provide the following information:		
Date of Baptism:	Name of Church:	City / State:
Date of First Penance:	Name of Church:	City / State:
Date of Holy Communion:	Name of Church:	City / State:
Date of Confirmation:	Name of Church:	City / State:

--PLEASE SEE OTHER SIDE OF FORM--

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Has student ever been tested by a specialist? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date of testing:	Name of specialist who administered the testing:
Diagnosis / Recommendations:	

Will student be attending After School Care? Yes <input type="checkbox"/> No <input type="checkbox"/>	
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Please list 2 people to contact who will take responsibility for child in case of illness or emergency, if parents cannot be reached:

Name:	Relationship to child:
Home #:	Cell #: Work #:

Name:	Relationship to child:
Home #:	Cell #: Work #:

Child's Physician:	Telephone #:
Hospital Preference:	Other:

Please list any medical information/chronic medical problems: (e.g. diabetes, epilepsy, allergies, all medications, etc.)

If you and the physician of your choice, listed above, cannot be reached in the event of an emergency, and, if in the judgment of the school authorities, immediate medical and/or hospital attention is indicated, do you authorize the school authorities to send or take your child to an available hospital or physician? **YES** **NO**

Signature of Parent or Guardian Date signed

As a parent and/or legal guardian, I authorize the treatment of my minor child by a qualified and licensed medical doctor in the event of a medical emergency, which, in the opinion of the attending physician, may endanger his/her life, cause physical disability or cause undue discomfort if delayed.

This consent is granted only after reasonable effort has been made to reach me. **YES** **NO**

Signature of Parent or Guardian Date signed

All information given is truthful and filled out to the best of my knowledge. If misinformation is found, intentional or not, I understand the student may be required to leave St. Pius X Catholic School.

Signature of Parent or Guardian Date signed

Registration Fee: \$ _____ Cash/Check # _____ Date Paid: _____ Initials of SPX Employee _____
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This agreement is made on _____, 201____, by and between (parent/guardian) _____ and Saint Pius X Catholic School, 217 South Sage Avenue, Mobile, Alabama, 36606, in consideration for the enrollment of the following child (children) in the 2018-19 academic school year.

Student's Name

Grade (2018-19)

1. *Tuition.* In consideration for my child's (children's) enrollment, I agree to abide by the rules and regulations of Saint Pius X Catholic School as set forth in the Parent/Student handbook. I agree to pay the tuition fee according to the Tuition/Fee schedule found in Section 2.

2. *Tuition/Fee Rates.* (See form "Tuition and Fee Rates 2018/19")

*Location to verify church contribution/subsidy:

Please Indicate Option: A* B

SPX: _____ or Other Parish (please list) _____

3. *Deposit.* I agree to enclose herewith a non-refundable registration fee of \$150.00 per child if received by Feb 15th 2018. After this day, the registration fee for returning students will be \$300 per child. This fee shall not apply towards my child's (children's) tuition. **I understand that the Registration Fee is a non-refundable fee and will not be returned to me if I choose to withdraw my child.**

4. *School Advisory Council Policy.* All tuition and fees owed from the prior school year must be paid in full before a student will be allowed to begin the new school year. In addition, all fees required for the new school year must be current before a student can begin classes. If during the school year tuition becomes 45 days delinquent, the parents will be contacted and informed that the tuition must be brought up to date within 10 days. If this is not done, or if specific arrangements are not made with the principal and pastor to bring the tuition up to date within a specific time period, the parent may be asked to withdraw the student from school.

Progress reports and final transcripts will be marked Incomplete until all tuition and fees are up to date. Access to online information will be blocked.

5. *Withdrawal of Child Penalty.* I agree to enroll and pay tuition for my child's (children's) enrollment in St. Pius X School for the entire academic school year of 2018/19. In the event I voluntarily withdraw my child (children) from St. Pius X School and transfer him/her (them) to another parochial, private, or public school within Mobile County, I understand that I am still responsible for tuition and fee payment for the entire year. If I am moving out of the city or am asked to leave St. Pius X, I understand registration fees will not be refunded and tuition, should it be paid up front, will be prorated, and the balance returned. I agree to pay the balance of the fees due to the school.

6. *Entire Agreement.* This Agreement embodies the full and final expression of the St. Pius X Tuition Agreement between the undersigned and St. Pius X School. This agreement is a complete integration of the parties' terms and supersedes all agreements previously made between the parties. Any agreement hereafter made between them shall be ineffective to change, modify, waive, release, discharge, terminate, or effect an abandonment of this agreement, in whole or in part, unless such agreement is in writing and signed by the party against whom enforcement is sought.

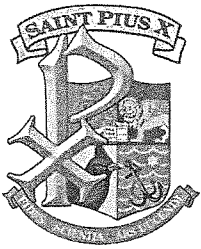
7. *Arbitration of Disputes.* Any disputes arising out of or relating to this Agreement, performance under this Agreement, or the breach thereof, including all disputes of any nature relating to my child's enrollment and attendance at this school, and including but not limited to the threshold questions of arbitrability and the formation of this arbitration agreement, shall be finally resolved by binding arbitration administered by the American Arbitration Association under its rules, and judgment upon the award rendered by the arbitrator may be entered in any court having jurisdiction. The arbitration shall be conducted in the English language in the city of Mobile, Alabama, applying the laws of the State of Alabama. There shall be one arbitrator who shall be selected in accordance with the procedures of the American Arbitration Association. Each party shall pay one half of the cost of the arbitrator. In no event shall punitive damages be awarded by the arbitrator in favor of either party, unless specifically authorized by applicable statute. This provision is continuing in nature and shall remain in force throughout the entire period of my child's enrollment at this school.

By my signature below, I agree to send any and all disputes relating to this agreement, to binding arbitration. I also hereby waive my right to a jury trial if dispute arises in any way relating to this agreement.

By signing this document I attest that I have read this contract and agree to be governed by all the terms, provisions, rules and regulations expressed herein.

Signature of Parent/Guardian

Date



Saint Pius X Catholic School

217 South Sage Avenue

Mobile, Alabama 36606

251-473-5004 251-473-5008(f)

www.St.PiusTenth.com

Office@StPiusTenth.com

Tuition payment Preference Form

Responsible Party Name: _____

Address: _____

State: _____ Zip code: _____

Phone: _____ Email: _____

Student Name(s): _____

For the 2018-19 school year, I will pay my student's tuition and fees by the payment plan checked below.

_____ **PLAN 1- Full tuition and fees payment by July 17th, 2018.** Payment will be made directly to the school. No FACTS fees will be assessed. Credit cards accepted.

_____ **PLAN 2- Ten monthly payments through FACTS.** Parents elect to pay tuition and fees on either the 5th or 20th of each month through the FACTS payment plan. The FACTS annual enrollment fee is \$41.00. First payment month is July. Payments can be divided into 10 equal payments or you may make a larger payment up front and finance the rest over 10 months.

_____ **PLAN 3- Credit Card payments through FACTS.** Parents may pay annually or monthly using Visa or MasterCard. In addition to the FACTS fee, there will be a convenience fee for each payment charged by FACTS.

Please select your method of payment and return this form with your plan indicated with your registration papers. If you chose Plan 2 or 3, and are not a first time FACTS family, we will activate the new tuition/fee amount in July.

ATTENTION PARENTS: If you are not enrolled in FACTS tuition payment, and wish to start, please contact the school office at 251-473-5004.

ANYONE not using one of the above plans MUST meet with Father Savoie and Mrs. Alvarez to discuss payment scheduled. Call the office to set up an appointment.

ST. PIUS X CATHOLIC SCHOOL

CONSENT TO WITHHOLD RELEASE OF INFORMATION

To: All Parents and Guardians

Under the provisions of the Family Educational Rights and Privacy Act of 1974, and as amended, you have the right to withhold the release of any or all of the information listed below. These items listed below may be released for any purpose with your consent at the discretion of St. Pius X Catholic School.

If you choose to have withheld any of the following information, a copy of this document must be on file. If this form is not received in the office with your registration papers, it will be assumed that the information may be released for the current school year. A new form for non-release must be completed each year.

Please consider very carefully your decision to withhold any item listed below. Should you decide to inform St. Pius X Catholic School not to release any or all the items listed below, any future requests for such information from individuals or entities not affiliated with St. Pius X Catholic School will be refused.

Please check any items YOU CHOOSE TO HAVE WITHHELD.

_____ Name, address, parents' email, parents' phone number for publication in the Student Directory.

_____ Name and address of a student to corporate vendors that service student needs. (Examples: companies that supply student pictures and uniforms)

_____ Photographs/video of student for the purpose of publicity materials, statistical data of officially recognized activities and sports, awards, scholarships and other honors released to the media and/or for use in the school yearbook.

Parent's / Guardian Name: _____

Parent's / Guardian's Signature: _____ Date: _____

Name and Class of Student (s): _____

*****PLEASE RETURN THIS FORM TO THE OFFICE ONLY IF YOU
HAVE CHECKED ANY OF THE ABOVE.*****