



St. Louise de Marillac
Faith Formation Department
1125 Harrison Avenue
LaGrange Park IL 60526
Phone: 708.482.8814
faithformation@slmschool.org

April 30, 2017

Dear Faith Formation Family,

The Faith Formation program utilizes a tuition management company to process tuition payments. Attached is the Faith Formation Family Registration Form for the 2017-2018 school year, which includes the FACTS tuition agreement. Accurate and complete information is essential, to ensure that your registration is processed promptly. The registration form will also be available on the parish web site.

A completed registration form for a returning family must be received before **July 31st** or a **late fee of \$30.00** will be **automatically** added to your tuition in FACTS. **August 31st is the last to register in order for your child to have a book on the first day of class.**

Students registering for the first time must attach the following documents to the registration form:

1. Copy of his/her birth certificate
2. An original Certificate of Baptism
3. Copies of transcripts, if transferring from another program

Your completed registration form may be dropped off in person at the Faith Formation office (school summer hours apply during June/July/August), you may also place the form in the Market Day mailbox outside the school main doors, scan and email the forms to faithformation@slmschool.org or return by mail.

All New and Returning Parents are invited to attend class with their child(ren) on the first day to meet your child's teacher and learn more about the curriculum for their grade. Classes will begin on September 10 for Sunday Session and September 13 for Wednesday Session. We will be utilizing the We Believe Series textbook in all our grades.

Also, if your child attends a school in which sports activities take place on Wednesday evenings they **MUST** register for the Sunday Session. **A maximum of three (3) absences is allowed for each semester (September – December and January - May).**

Please email or call the Faith Formation office with any questions you may have.

Best Regards,

AnnMarie Mahay

Faith Formation Tuition and Fee Schedule 2017 – 2018

Tuition

- One Child = \$250.00
- Two Children = \$355.00
- Three or More Children = \$420.00

Sacramental Fees (per child)

- | | |
|---|---------|
| <input type="checkbox"/> 2 nd Grade Reconciliation/Communion Fee | \$90.00 |
| <input type="checkbox"/> 8 th Grade Confirmation Fee | \$90.00 |
| <input type="checkbox"/> 8 th Grade Confirmation Robe Purchase | \$15.00 |

Total Amount to be Charged: \$ _____

All payments options will be processed by FACTS and parents can select their payment plan using the FACTS payment plan link on our web site when it goes live in early July. All payment plans offer payment credit card or ACH bank transfer. Parents selecting a budget option can pay using automatic bank payment or a credit card charge to MasterCard, Discover, or American Express. The credit card option will incur a credit card convenience fee of 2.5% and the exact dollar amount of the fee will be reviewed with you at the time you enroll with FACTS.

Parents can select to make payments on the 1st, 5th, 10th or 15th of the months.

With FACTS, parents can view all of their payment activity online, change payment method from month to month, make additional payments and view upcoming payments.

If a family should experience unexpected, and legitimate, financial difficulty, the individual responsible for payments need to communicate with the parish Business Office **at least three business days** prior to the payment due date. With sufficient notice, a payment may be adjusted during the school year.

All families must register on FACTS, but can pay by check and have it credited immediately to their FACTS account.



FAITH FORMATION
A JOURNEY FOR LIFE

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2017-2018 SCHOOL YEAR FAMILY REGISTRATION FORM

Parent/Guardian Information: please print legibly

Parent #1 Name _____	Parent #2 Name _____
Parent #1 or #2 Maiden Name (if applicable) _____	_____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
(H) Phone _____ Phone _____	(H) Phone _____ Phone _____
Email _____	Email _____
Religious Affiliation _____	Religious Affiliation _____

Person responsible for payment, IF different from above:

Name of Parent/Guardian _____ Phone _____

Address: _____

Email _____

Sessions Available – please make your selection below: REQUIRED FIELD!

Wednesdays – 5:00 PM – 6:30PM Sundays – 10:45 AM – 12:15 PM

I would like to volunteer for the 2016-2017 Year: Catechist Aide Substitute

FACTS TUITION SETUP – ALL FAMILIES MUST COMPLETE

Please check one of the following Tuition Plans: 1 Payment (August) 8 Months (Aug/Mar)

Late Fee of \$30 will be automatically added to the total tuition payment, if completed registration from a returning family is not received before July 31st.

TERMS

A tuition payment is considered paid ONLY WHEN IT IS RECEIVED AT FACTS Tuition Management. If a payment is not received by FACTS by your agreed upon due date, FACTS will charge you a \$30.00 late fee.

All tuition for the current school year must be paid in full by May 1st of that year. All fees are non-refundable. All prior unpaid tuition balances must be added to your FACTS account at registration.

I realize that late payment of fees, tuition or late charges will place an unfair burden on other parents. If monthly payments are not made on time, I understand:

- Accounts overdue 2 months may be subject to the student being withheld from Faith Formation classes until payment is made.
- Student(s) will not receive report cards, transcripts or participate in sacramental ceremonies, and may not be eligible for participation in the second semester and/or enrollment the following year.

I understand that if at any time these commitments cannot be fulfilled, I must contact the Program Coordinator to make other payment arrangements.

Signature

Date

<u>CHILDREN'S NAME(S)</u>	<u>SCHOOL GRADE</u>

Student Ethnicity:

- Native American
 Asian
 Black Non-Hispanic
 Hispanic
 Bi-Racial
 White Non-Hispanic

School Attending:

Name: _____

Address: _____

Phone Number: _____

Medical Conditions / Medications: _____

Special Needs / Accommodations: _____

In case of Medical Emergency:

Name of Doctor: _____ Phone No. _____

Are you registering a new student today? Yes No

Is this child(ren) baptized in the Catholic faith? Yes No

If transferring from another Faith Formation program, which parish? _____

Marital Status (please circle): Married Divorced-Single Divorced-Remarried
 Separated Widowed Never Married

Child(ren) reside(s) with (please circle): Parents Mother Father Guardian

Guardian Information (If Other Than Parents) :

Name: _____ Relationship: _____

Address: _____

Telephone

Number: _____

EMERGENCY CONTACT (OTHER THAN PARENTS): **REQUIRED FIELD!**

Name: _____ Relationship to child: _____

Address: _____ Phone #: _____

List Any Individuals Who May **Not Permitted** to Pick Up Your Child(ren):

Office to Complete: Birth Certificate Baptismal Certificate Transcripts