

**ST. BRIDGET SCHOOL K-8
NEW FAMILY REGISTRATION FORM**

Family Name: _____ Date: _____

Please list all children in your family who will be attending St. Bridget School next year in grades K-8. **Separate form needed for pre-school available in school office.**

Child's Name	Grade
_____	_____
_____	_____
_____	_____
_____	_____

Please check one from each category:

Tuition Plan: Tuition Plan I (Parishioner) ___ Tuition Plan II (Non-Parishioner) ___

Applied for Tax Scholarship ___

Payment Plan: 11 Month ___ 10 Month ___ Quarterly ___ Annually ___

Note: All payment plans will be paid directly to FACTS Management.

We are members of another parish which has agreed to provide subsidy: yes / no
If yes, please list parish name _____

Please attach subsidy card. Without this card, you will be billed at the Non-Parishioner rate.

Please make registration fee checks payable to St. Bridget School.

Check # _____

Cash \$ _____

Parent Signature _____ Date _____

Print Parent Signature _____ Phone _____

Please Attach Your Registration Fee & Return this form to the Office

For School/Parish Office Use Only:	
Registration Fee Paid	_____
Date Reg./Re-Reg.	_____
Birth Certificate	_____
Baptismal Certificate	_____
Tax Scholarship (No Reg Fee)	_____

