St. PATRICK'S
EPISCOPAL CHURCH & DAY SCHOOL

2023/2024 ELEMENTARY PROGRAM

TUITION AGREEMENT FORM

_____, _____ _____ ☐   ☐
CHILD'S LAST NAME   FIRST NAME   DATE OF BIRTH   BOY   GIRL

_____ _____ _____
AGE ON SEPT 30, 2023   GRADE COMPLETED SPRING 2023   SCHOOL ATTENDING IN FALL 2023

_____
MAILING ADDRESS   CITY, STATE   ZIP

_____ _____
MOTHER/GUARDIAN responsible for child   MOTHER/GUARDIAN CELL PHONE

_____ _____
FATHER/GUARDIAN responsible for child   FATHER/GUARDIAN CELL PHONE

_____ _____
MOTHER/GUARDIAN E-MAIL ADDRESS   FATHER/GUARDIAN E-MAIL ADDRESS

Is your child new to our Elementary Program ? ☐ YES   ☐ NO

Are you a member of St. Patrick's Episcopal Church? ☐ YES   ☐ NO

PLEASE CHECK PROGRAM SELECTION(S):

○ **Before & After Care:** Early Release days are included. $335 /MONTH

  ☐ **Holiday Care*:** For students enrolled in Before and/or After Care $30 /DAY

○ **Before Care ONLY**: 6:30 to 8:30 AM $155 /MONTH

○ **After Care ONLY**: 3:00 to 6:00 PM - Early release days are included. $235 /MONTH

○ **Holiday Care* ONLY:** For students **NOT** enrolled in Before and/or After Care. $50 /DAY

○ **Early Release ONLY:** For students **NOT** enrolled in Before and/or After Care. $30 /DAY

* Holiday Care sign up sheets will be available in the lobby at least one week before the holiday.

ANNUAL REGISTRATION FEE $50 PER CHILD
Registration Fee of $50 per child is due with registration form. **Registration fee is NON-REFUNDABLE

WITHDRAWL INFORMATION
 A two week notice is required to withdraw from all programs.

PARENT/GUARDIAN TUITION AGREEMENT
I have read and understand the St. Patrick's Episcopal Day School Parent Handbook in it's entirety. I understand the costs, due dates, policies, and I agree to pay the marked, above tuition in full by the tenth of each month.

_____ _____
PARENT/GUARDIAN SIGNATURE   **DATE**

FOR OFFICE USE ONLY	
Registration Date:	
☐New Student ☐Returning Student	
Notified Sandy?	
ProCare Access?	

If parents/guardians split tuition payments, please list additional payers here:

_____

This Tuition Agreement Form expires on the last day of the 2023-2024 School Year.

St. Patrick's
Episcopal Church & Day School

EMERGENCY MASTER CARD

STUDENT: _____ _____ ☐   ☐
LAST NAME   FIRST NAME   DATE OF BIRTH   BOY   GIRL

PRIMARY GUARDIAN INFORMATION

FULL NAME:		
RELATIONSHIP TO CHILD:		
MARITAL STATUS:		
MAILING ADDRESS:		
CITY, STATE, ZIP:		
HOME ADDRESS OF CHILD?		
EMAIL ADDRESS:		
ACCESS TO PARENT APP?	☐ YES ☐ NO	☐ YES ☐ NO
CELL PHONE #:		
WORK PHONE #:		
EMPLOYER/OCCUPATION:		

Name of parent who has legal custody of child (if applicable): _____
Custody/access restrictions (if applicable):_____

If there is a Custody Order, Restraining Order or any other Order in place that pertains to the custody and/or access of the child.
A copy of the Order(s) is to be attached to the registration paperwork.

MEDICAL/ALLERGY INFORMATON

Pediatrician Name: _____ Pediatrician's Phone#: _____
Child's Dentist: _____ Dentist's Phone#: _____
List any special concerns, including but not limited to: existing medical conditions, chronic illness, medications, and/or any special needs of your child: _____

☐My Child has no allergies.   ☐My child's allergies <u>are NOT life threatening</u>: He/she is allergic to:_____
☐My child's allergies **ARE LIFE THREATENING***: He/she is allergic to:_____

Do we have your authorization to post your child's name and allergy information in public view (*kitchen & classroom*)? ☐No ☐Yes

*If your child suffers from life threatening allergies, it is essential that you complete the school's Emergency Medication Authorization Form, provide a copy of his/her emergency plan, and personally inform your child's teacher. It is the parent's responsibility to provide guidance to the school with respect to the prevention of and treatment of allergic reactions prior to your child starting St. Patrick's.

EMERGENCY CONTACTS/AUTHORIZED PICK UP PERSONS

My child has permission to be released to the following individuals, childcare facilities, or transportation services in addition to the parents/guardians listed above. **Please notify the below individuals that they will be required to show proof of identity at lobby window.**

FIRST & LAST NAME	RELATIONSHIP TO STUDENT	CONTACT IN CASE OF EMERGENCY? *circle one*	EMERGENCY PHONE NUMBER
		Y or N	
		Y or N	
		Y or N	
		Y or N	

I authorize St. Patrick's Episcopal Church & Day School to secure emergency medical treatment for my child.

_____   _____
Signature of Parent or Guardian   **Date**

AUTHORIZATION TO PROVIDE MEDICAL TREATMENT & RELEASE OF MEDICAL RECORDS AND REPORTS

_____
Student's Name

I _____ give permission for St. Patrick's
Parent/Guardian name, please print
Episcopal Day School personnel and after care personnel to seek medical attention for my child when parents or emergency contacts cannot be reached.

Legal Relationship: ☐Natural Parent   ☐Adoptive Parent   ☐Foster Parent

_____   _____
Name of Doctor   Contact number

_____   _____
PARENT/GUARDIAN SIGNATURE   DATE

TO BE COMPLETED BY PHYSICIAN IN THE EVENT OF AN INJURY

_____   _____
Date of Injury   Initial Diagnosis

_____

_____

_____   _____
Signature of Physician or Authorized Representative   Date

_____
Name and address and phone number of Medical Facility

PHOTO CONSENT FORM

_____
Student's Name

I, _____ the parent or legal guardian of the above-named
Parent/Guardian name, please print
student, give permission for my child to be photographed while attending St. Patrick's Episcopal Day School. The photograph may be used for display at school related meetings, publications, or publicity for the school. This includes uploading photos to our school's password protected website. This consent releases from liability all personnel of the school and any others who have received permission by the staff to take photos at the school or school related activities.

_____ _____
PARENT/GUARDIAN SIGNATURE   DATE

PARENTAL AWARENESS OF RECORDINGS

I am aware that St. Patrick's Episcopal Day School utilizes recordings and/or taping of my child named above (such as digital recordings, videotaping, audio recordings, web cam) while in the center for observation/security purposes.

_____ _____
PARENT/GUARDIAN SIGNATURE   DATE

IF NOT GIVING PHOTO CONSENT, please read & sign below:

⭕ I DO NOT give consent for my child to be photographed for any reason other than to send daily parent updates through ProCare, the parent engagement app.

_____ _____
PARENT/GUARDIAN SIGNATURE   DATE

MEDIA PERMISSION FORM FOR ELEMENTARY STUDENTS

_____
Student's Name

I _____ give my child listed above
      Parent/Guardian name, please print
permission to view "PG" rated media (as stated in the Dept. of Education policy below)

**PROGRAMS, MOVIES AND VIDEO GAMES POLICY
(Per Dept. of Education, Title 28, Bulletin 137, Part 1509, 11 a-f)**

"Programs, movies, and video games with violent or adult content, including but not limited to soap operas, televisions news, and sports programs aimed at audiences other than children, shall not be permitted in the presence of children.
All television, video, DVD, or other programming shall be suitable for the youngest child present.
"PG" programming or its television equivalent shall not be shown to children under age five.
"PG" programming shall only be viewed by children age five and above and shall require written parental authorization."

In accordance with the above policy, St. Patrick's Day School is required to have written parental authorization in their files in order to watch "PG" rated media in the classroom.

_____ _____
PARENT/GUARDIAN SIGNATURE   DATE

AUTHORIZATION FOR THE APPLICATION
OF TOPICAL PRODUCTS

_____
Student's Name

I _____ give permission for St. Patrick's
Parent/Guardian name, please print
 Episcopal Day School staff to apply the following topical products to my child whether center provided or parent provided:

YES   NO
o   o Sunscreen
o   o Insect Repellant
o   o Other:_____
(Please list)

_____   _____
PARENT/GUARDIAN SIGNATURE   DATE

This one time authorization will remain in effect until a new authorization is signed.

HANDBOOK ACKNOWLEDGEMENT

_____
STUDENT'S NAME

I, _____ hereby confirm that I have read
Parent/Guardian name, please print
and understand the St. Patrick's Episcopal Day School Parent Handbook. I also understand that
a copy of our current Parent Handbook can be viewed, saved, and printed from our website:
www.StPatsLA.org/Admissions

_____   _____
PARENT/GUARDIAN SIGNATURE   DATE

*Please sign up with the lobby window if you are interested in volunteering for special events.

Dear Parents,

We know how important it is to stay up to date on your child's learning journey, which is why we're excited to offer you access to   Solutions' best-in-class parent app.

Procare

What can I see on the App?
Once you download the Procare app on your smartphone, we can update you on your child's daily activities, milestones, and more. We can send you photos and videos of your child, as well as keep you in the loop on upcoming events with newsletters and time-sensitive information with messaging.

How do I get the app?
You will receive an email from Procare with a unique 10-digit code and instructions on how to download and log into the the app.

Portfolio
We can now create a portfolio containing daily activities along with pictures taken throughout the day. These pictures will be available for you to download, share, print or link to Facebook.

Can I make tuition payments to St. Patrick's through Procare?
Yes. However not through the app. The ProCare app engineers are still working to enable payments through the Procare app.
To make payments online, visit: **MyProCare.com**
- ⇒ Log-in using your ProCare credentials (same as app).
- ⇒ Choose the Pay button.
- ⇒ Fill in the credit card information and amount.
- ⇒ Choose whether you want to same the card for future payments.
- ⇒ Select Pay Now.

Can I print receipts and Tuition Statement through Procare?
Yes. To print receipts or Tuition Statements online through Procare, Visit: **MyProCare.com** and log-in using your ProCare credentials (same as app).
- ⇒ At the top of your homepage, click "Reports".
- ⇒ Use the drop down feature to choose which report you'd like to run.
- ⇒ Click "RUN REPORT".
- ⇒ The .pdf will auto populate and you will be able to save and/or print your receipt or tuition statement.

What other Payment Methods are accepted by St. Patrick's Episcopal Day School?
- <u>Auto Draft.</u> Using a credit card or bank account, you may enroll in auto-draft. *Please see attached form.*
- <u>Cash.</u> *Exact change only.*
- <u>Check.</u> Please make checks payable to <u>St. Patrick's Episcopal Day School</u> and place in envelope with student's name & amount. Place envelope with check in our "Tuition Payments Box" located in the lobby.

We think you'll really enjoy this new way for us to stay connected!

Sincerely,

St. Patrick's Episcopal Day School Administration

Automated Payment Processing

Procare SOLUTIONS

Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) ___St. Patrick's Episcopal Day School___ to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

STUDENT'S FIRST AND LAST NAME HERE

COMPLETE ONE SECTION ONLY

SECTION A (Credit Card)

Cardholder Name   Phone #

Cardholder Address   City   State   Zip

Account Number   Expiration Date

Cardholder Signature   Date

SECTION B (Bank Account)

Your Name   Phone #

Address   City   State   Zip

Bank or Credit Union Name   Bank or Credit Union Address   City   State   Zip

Routing Transit Number (see sample below)   Account Number (see sample below)   ☐ Checking   ☐ Savings

Authorized Signature   Date

Your Name	0001
Any Street, Anytown	
Tel: (001) 555-0000	DATE _____
PAY TO THE ORDER OF	**ATTACH VOIDED CHECK HERE** $
	DEPOSIT SLIPS NOT ACCEPTED
	/100 DOLLARS
BANK	**Savings Bank** Any Street, Anytown Tel: (001) 555-5555
RE	MP

`123456789`   `000123456789`   `0001`

ROUTING NUMBER   ACCOUNT NUMBER   CHECK NUMBER

FOR OFFICIAL USE ONLY

_____
Date Received

_____
Employee Signature

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ST. PATRICK'S
EPISCOPAL CHURCH & DAY SCHOOL

STUDENT REGISTRATION CHECKLIST

☐ Tuition Agreement Form

☐ Emergency Master Card

☐ Authorization to provide Medical Treatment... Form

☐ Photo Consent/Parental Awareness of Recordings Form

☐ Media Permission Form **(Elementary & Summer Camp Programs Only)**

☐ Authorization of Topical Products Form

☐ Signed Handbook Acknowledgement

☐ Copy of Birth Certificate

☐ Copy of Current Immunizations Annual

☐ Registration Fee and/or Automated Payment Processing Form

St. Patrick's

EPISCOPAL CHURCH & DAY SCHOOL

ST. PATRICK'S EPISCOPAL DAY SCHOOL | 2023-2024 CALENDAR

Revised January 2024

AUGUST 2023

	7	First Day of School for St. Patrick's
	7-8	Elementary Holiday Care
	9	Zachary Schools Begin
	21-25	Fall Book Fair

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

FEBRUARY 2024

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29		

9	Preschool Mardi Gras Parade
12	Staff Development Day, Closed
13	Mardi Gras Holiday, Closed
14	Elementary Holiday Care
16	Valentine's Day Class Parties
26	Summer Camp Registration Begins

SEPTEMBER 2023

	4	Labor Day Holiday, Closed
	15	St. Jude Trike-a-Thon
	18	Elementary Holiday Care

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

MARCH 2024

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

1	Elementary Holiday Care, In-service
8	Muffins with Mom Event
11	In-House Re-Registration for 2023/24
15	St. Patrick's Day Parties
18	Preschool Open Registration 2023/24
25-28	Spring Bookfair
29	Good Friday, Closed
31	Easter Sunday

OCTOBER 2023

	TBA	Preschool Open House (Tentative)
	2	Blessing of the Pets
	9-11	Elementary Holiday Care, Fall Break
	24	Christmas Pictures, Infants –2's
	25	Christmas Pictures, 3's & 4's
	27	Fall Carnival

S	M	T	W	T	F	S
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8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

APRIL 2024

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

1	Classroom Easter Egg Hunt & Parties
1-5	Elementary Holiday Care
16	Spring Pictures Infant—2's
17	Spring/Graduation Pictures 3's & 4's
19	Donuts with Dad

NOVEMBER 2023

	10	Preschool Thanksgiving Feast
	20-22	Elementary Holiday Care, Fall Break
	23-24	Thanksgiving Holiday, Closed

S	M	T	W	T	F	S
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5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAY 2024

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

6-10	Teacher Appreciation Week
9	Preschool Graduation Day
21-23	Elementary Early Dismissal
23	Last Day for Zachary Schools
24	Elementary Holiday Care
27	Memorial Day Holiday, Closed
28	First Day of Elem Summer Camp

DECEMBER 2023

	15	Pre-K Christmas Sing-a-long & Classroom Christmas Parties
	18-20	Elementary Early Dismissal, Elementary Holiday Care
	21-22	Full Days, Elementary Holiday Care
	25-26	Christmas Holiday, Closed
	26-28	Elementary Holiday Care, Winter Break
	29	New Year Holiday, Closed

S	M	T	W	T	F	S
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10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

JUNE 2024

S	M	T	W	T	F	S
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2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	2
23	24	25	26	27	28	29
30						

| 19 | Juneteenth |

JANUARY 2024

	1	New Year's Day Holiday, Closed
	2-5	Elementary Holiday Care, Winter Break
	8	Zachary Schools Resume
	15	Dr. MLK, Jr. Day Holiday, Closed

S	M	T	W	T	F	S
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14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

JULY 2024

S	M	T	W	T	F	S
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7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

| 4 | Independence Day Holiday, Closed |

KEY: Elementary Holiday Care | Elementary Early Release | Elementary Special Day | Special Event Day | St. Patrick's Closed