



STUDENT REGISTRATION CHECKLIST

- ☐ Tuition Agreement Form
- ☐ Emergency Master Card
- ☐ Authorization for Medical Treatment Form
- ☐ Photo Consent/Parental Awareness of Recordings
- ☐ Media Permission Form (Elementary Only)
- ☐ Authorization of Topical Products
- ☐ Signed Handbook Acknowledgement
- ☐ Copy of Birth Certificate
- ☐ Copy of Current Immunizations Annual
- ☐ Registration Fee

TUITION AGREEMENT FORM

CHILD'S LAST NAME _____ FIRST NAME _____ DATE OF BIRTH _____ Please Choose One:
☐ MALE
☐ FEMALE

AGE ON SEPT 30, 2024 _____ T-SHIRT SIZE _____ START DATE _____ ARE YOU RETURNING STUDENT?
☐ YES ☐ NO

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 _____

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

Would you like to be added to St. Patrick's Episcopal Church's Weekly Newsletter? ☐ YES ☐ NO

PLEASE CHECK PROGRAM SELECTION:

PART-TIME PROGRAM (6:30AM—3:00PM)

- ☐ **Infant Classroom:** 5 months - 15 months of age \$955/MONTH
- ☐ **Toddler Classroom:** 16 months - 2 years of age \$920 /MONTH
- ☐ **Pre-K-3 Classroom:** 3 years of age \$865 /MONTH
- ☐ **Pre-K-4 Classroom:** 4 years of age \$840 /MONTH

FULL-TIME PROGRAM (6:30AM—6:00PM)

- ☐ **Infant Classroom:** 5 months - 15 months of age \$1,015 /MONTH
- ☐ **Toddler Classroom:** 16 months - 2 years of age \$980 /MONTH
- ☐ **Pre-K-3 Classroom:** 3 years of age \$920 /MONTH
- ☐ **Pre-K-4 Classroom:** 4 years of age \$890 /MONTH

ANNUAL REGISTRATION FEE \$150 PER CHILD

Registration Fee is due with registration form. **Registration fee is NON-REFUNDABLE

PARENT/GUARDIAN TUITION AGREEMENT I have read and understand the Tuition Policy in the St. Patrick's Episcopal Day School Parent Handbook. I understand the policies, times, and cost. I agree to pay the marked, above fees and understand payment is due the Monday of each session, before check-in.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

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

FOR OFFICE USE ONLY	
Registration Date:	
<input type="checkbox"/> New Stu <input type="checkbox"/> Returning Stu	
Accountant	
ProCare	

EMERGENCY MASTER CARD

STUDENT:

LAST NAME

FIRST NAME

DATE OF BIRTH

☐

MALE

☐

FEMALE

PRIMARY GUARDIAN INFORMATION

FULL NAME:	MOM	DAD
RELATIONSHIP TO CHILD:		
MARITAL STATUS:		
MAILING ADDRESS:		
CITY, STATE, ZIP:		
HOME ADDRESS OF CHILD?		
EMAIL ADDRESS:		
ACCESS TO PARENT APP?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> 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 INFORMATION

Pediatrician Name: _____ Pediatrician's Phone#: _____

Child's Dentist: _____ Dentist's Phone#: _____

List any special concerns, including but not limited to: medications, existing medical conditions, medical history, chronic illness, and/or any special needs of your child: _____

☐ My Child has no allergies. ☐ My child's allergies are NOT life threatening: 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 with allergy information in public view (kitchen & classroom)? ☐ Yes ☐ No

*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? <i>circle one</i>	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, -----
Parent/Guardian name, please print----- the parent or legal guardian of the above-named 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

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

- ☐ ☐ Sunscreen
- ☐ ☐ Insect Repellant
- ☐ ☐ Other: _____

(Please list)

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

PARENT/GUARDIAN SIGNATURE

DATE

HANDBOOK ACKNOWLEDGEMENT PLEASE SIGN AND RETURN

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 front desk if you are interested in volunteering for special events.

ST. PATRICK'S

EPISCOPAL CHURCH & DAY SCHOOL

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.



What can I see on the App?

Once you download the Procure 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 Procure with a unique 10-digit code and instructions on how to download and log into 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 Procure?

Yes. However not through the app. The ProCare app engineers are still working to enable payments through the Procure 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 save the card for future payments.
- ⇒ Select Pay Now.

Can I print receipts and Tuition Statement through Procure?

Yes. To print receipts or Tuition Statements online through Procure, 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?

- Auto Draft. Using a credit card or bank account, you may enroll in auto-draft. *Please see attached form.*
- Cash. *Exact change only.*
- Check. Please make checks payable to St. Patrick's Episcopal Day School 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



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)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Authorized Signature	Date			

0001

DATE _____

PAY TO THE ORDER OF **ATTACH VOIDED CHECK HERE** \$ _____

DEPOSIT SLIPS NOT ACCEPTED 100 DOLLARS

Savings Bank
Any Street, Anytown
Tel: (001) 555-5555

RE _____

123456789 **000123456789** **0001**

ROUTING
NUMBER

ACCOUNT
NUMBER

CHECK
NUMBER

FOR OFFICIAL USE ONLY

Date Received

Employee Signature

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<div>5First Day of School for St. Patrick's</div> <div>5-7Elementary Holiday Care</div> <div>8Zachary Schools Begin</div> <div>19-23Fall Book Fair</div>	<div>AUGUST 2024</div> <table><tr><th>S</th><th>M</th><th>T</th><th>W</th><th>T</th><th>F</th><th>S</th></tr><tr><td></td><td></td><td></td><td></td><td>1</td><td>2</td><td>3</td></tr><tr><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr><tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr><tr><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td></tr><tr><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td></tr></table>	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	<div>FEBRUARY 2025</div> <table><tr><th>S</th><th>M</th><th>T</th><th>W</th><th>T</th><th>F</th><th>S</th></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td></tr><tr><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr><tr><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td></tr><tr><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td></tr><tr><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td></td></tr></table> <div>14Elementary Holiday Care</div> <div>14Valentine's Day Class Parties</div> <div>24Summer Camp Registration Begins</div> <div>28Mardi Gras School Parade</div>	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								
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<div>1Preschool Open House</div> <div>8Blessing of the Pets</div> <div>14-16Elementary Holiday Care, Fall Break</div> <div>22Christmas Pictures, Infants –2's</div> <div>23Christmas Pictures, 3's & 4's</div> <div>25Fall Carnival</div> <div>31Halloween Parties</div>	<div>OCTOBER 2024</div> <table><tr><th>S</th><th>M</th><th>T</th><th>W</th><th>T</th><th>F</th><th>S</th></tr><tr><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr><tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr><tr><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td></tr><tr><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td></tr><tr><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td></td><td></td></tr></table>	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			<div>APRIL 2025</div> <table><tr><th>S</th><th>M</th><th>T</th><th>W</th><th>T</th><th>F</th><th>S</th></tr><tr><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr><tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr><tr><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td></tr><tr><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td></tr><tr><td>27</td><td>28</td><td>29</td><td>30</td><td></td><td></td><td></td></tr></table> <div>11Donuts with Dad</div> <div>15Spring Pictures Infant—2's</div> <div>16Spring/Graduation Pictures 3's & 4's</div> <div>18Closed. Good Friday</div> <div>21Class Parties, Easter Egg Hunt</div> <div>21-25Elementary Holiday Care, Spring Break</div>	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										
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<div>13Pre-K Christmas Sing-a-long & Classroom Christmas Parties</div> <div>18-20Elementary Early Dismissal, Elementary Holiday Care</div> <div>23Full Days, Elementary Holiday Care</div> <div>24-25Christmas Holiday, Closed</div> <div>26-30Elementary Holiday Care, Winter Break</div> <div>31New Year Holiday, Closed</div>	<div>DECEMBER 2024</div> <table><tr><th>S</th><th>M</th><th>T</th><th>W</th><th>T</th><th>F</th><th>S</th></tr><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td></tr><tr><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td></tr><tr><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td></tr><tr><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td></tr><tr><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td><td></td></tr></table>	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					<div>JUNE 2025</div> <table><tr><th>S</th><th>M</th><th>T</th><th>W</th><th>T</th><th>F</th><th>S</th></tr><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td></tr><tr><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td></tr><tr><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td></tr><tr><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td></tr><tr><td>29</td><td>30</td><td></td><td></td><td></td><td></td><td></td></tr></table> <div>2-30Summer Camp</div>	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												
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