



2018 - 2019 Registration Form
Saint Louis Catholic Montessori Atrium Catechesis of the Good Shepherd
Level I (ages 3-6), Level II (ages 6-9), Level III (ages 9-12+)

	First and Last Name	Address	Home Ph:	Email	Religion
Father			Cell:		
			Wk:		
Mother			Cell:		
			Wk:		

Child(ren) reside(s) with: [] **Both parents** [] **Mother** [] **Father** [] **Other (please specify)** _____

Level 1 (ages 3-6) Sessions: • Wed 10-11:30am • Thurs 10-11:30am • Thurs 4:15-5:45pm
(Level 1 children must be potty trained without assistance and able to follow simple instructions)

Level 2 (ages 6-9) Sessions: • Mon 2:30-4:30pm (possibly later?) • Tues 4-6pm (possibly 4:30-6:30pm) *(Level 2 children must be 6 years old or more)*

Level 3 (ages 9-12+) Session: • Tues 4-6pm (possibly 4:30-6:30pm) *(Level 3 children must have at least 2 years of Level 2)*

Child's First and Last Name	M/F	(Age) Date of Birth	Atrium Session (Circle all possible) (Mark 1 st and 2 nd choice)	Check if Received (or expected date if soon)				Previous Atrium Experience? Where? How long?
				Baptism	Penance	Eucharist	Confirmation	
			__ M __ T __ W-AM __ Th-AM __ Th-PM					
			__ M __ T __ W-AM __ Th-AM __ Th-PM					
			__ M __ T __ W-AM __ Th-AM __ Th-PM					
			__ M __ T __ W-AM __ Th-AM __ Th-PM					

Child's Name	Health concerns, allergies, medications, learning disabilities, or other concerns

Emergency Contact	First and Last Name	Phone	Relation to child
Permission to Pickup*			

* Children will only be released to parents, legal guardians, emergency contact, or persons authorized by parent or legal guardian.

Tuition

	1 child	2 children	3 children	4 or more
Registered in Parish	\$375	\$700	\$1000	\$1275
Out-of-Parish	\$575	\$1100	\$1600	\$2075

Fees and Discount

Registration Fee	\$50/family (<i>\$25 before August 15, 2018. Registration fee is waived if you pay the tuition in full by 6/15/18.</i>)
Late Payment Fee	\$25/family (<i>To avoid a \$25 late fee, HALF of the total tuition is due by 8/15/18; the remainder is due by 2/15/19.</i>)
Catholic School Discount	-\$25/child (<i>If any of your children attend Catholic school, then each atrium child receives a \$25 discount.</i>)

St. Louis Parish Envelop ID # _____ or Parish Name (if out of parish) _____

The non-refundable registration fee is due at registration. It secures your child(ren)'s atrium placement.

Tuition assistance and tuition payment plans are available for true financial need.

Do any of your children currently attend Catholic School? If so, where? _____

Checks can be made payable to "Saint Louis Church."

Atrium Tuition	
Registration Fee	
Late Payment Fee	
Catholic School Discount	
Total Payment	

Volunteer Name _____

- Bring flowers** for some atrium sessions
 Prayer Partner
 Donate Dixie cups, flour, rapid rise yeast, etc.
 Clean atrium
 Artistically paint figures and scenes
 Sew Materials
 Woodworking and finishing carpentry
 Calligraphy

Volunteer opportunities below involve working with children **I do** / **I do not** wish to volunteer in the same session as my child(ren).

- Trained Catechist** (www.montessori-mcci.org, www.cgsusa.org)
 Babysit catechist's child - needed for Tuesday afternoon
 Weekly Assistant (Training provided. Assistants do not give catechetical presentations but serve important support roles, by helping children with practical life skills, record-keeping, and modeling a calm presence.)
 Substitute Assistant (Training provided)

The Diocese of Arlington requires that all volunteers who work with children meet the following requirements:

- Attend a mandatory Child Protection Safety seminar (register at www.virtus.org).
- Complete Child Protection Safety paperwork, including a background check.
- After completing the above requirements, in subsequent years volunteers must watch a 30 minute refresher DVD on Child Protection Safety.

- I am willing to meet the Diocesan Requirements for Child Protection Safety.
 I have met the Diocesan Requirements for Child Protection Safety. VIRTUS Completion Date _____ Location _____
 I have watched the refresher DVD on Child Protection Safety on this date _____ Location _____

I give my permission for my child(ren) (named above) to participate in Saint Louis Atrium. I understand that children will be well supervised and I will not hold Saint Louis Church, its employees or volunteers responsible if an accident should occur. By signing this I agree to the policies outlined above and in the Saint Louis CGS Montessori Atrium Handbook.

Parent Signature: _____ **Date:** _____

Office use only: Date Received: _____	
Check #: _____	Ck Date: _____ Amt Pd: _____ Bal Due: _____
Info: _____	