



St. John the Baptist Catholic School

1057 Hughes Road
Madison, Alabama 35758
Phone: (256) 722-0772 Fax: (256) 722-0151
www.stjohnb.com

2019-20 RE-REGISTRATION FORM

FAMILY NAME: _____
Last Name Father Mother

PARISH AFFILIATION: _____
(The parish/church in which you are currently registered)

_____ Will be returning to St. John's Catholic School for the 2019-2020 school year.

_____ Will **NOT** be returning to St. John's Catholic School for the 2019-2020 school year. Reason: _____

Name of Student(s) Returning	Student(s) grade for 2019-2020	Name of Student(s) NOT Returning
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Two Options for Re-registration Payment:

Option 1: Payment in Full

- (1) Child \$150.00
- (2) Children \$300.00
- (3) Children \$450.00
- (4) Children \$600.00

Option 2: Installment Payments:

- | <u>Now</u> | <u>Final installment by 03/07/19</u> |
|-----------------------|--------------------------------------|
| (1) Child \$ 75.00 | (1) Child \$ 75.00 |
| (2) Children \$150.00 | (2) Children \$150.00 |
| (3) Children \$225.00 | (3) Children \$225.00 |
| (4) Children \$300.00 | (4) Children \$300.00 |

_____ Please send a student application form for each new sibling:

<u>Name of each new sibling(s):</u>	<u>Student's grade for 2019-2020</u>
_____	_____
_____	_____

Re-registration fees are non-refundable (except for re-location).

***K4** tuition is separate from K-8 grades.

OFFICE USE ONLY	
Date Received:	R
Amount Paid:	S
Check #:	

Principal – Mrs. Sheryl B. Lewis
Pastor – Fr. Bryan Lowe