



EPIPHANY EPISCOPAL SCHOOL

# Registration Packet

## 2026-2027

*Providing an educational foundation that fosters exemplary academic, Christian, and social development.*

Epiphany Episcopal School does not discriminate in admissions, educational programs, or employment against any individual on the basis of sex, age, nationality, ethnic origin, or disabilities.



361.592.2871



120 N. Third St. Kingsville, TX



hdelaup@epiphanyschoolkingsville.org



EPIPHANY EPISCOPAL SCHOOL

# Document Check List

Completed Registration Packet \_\_\_\_\_

Birth Certificate (copy only) \_\_\_\_\_

Social Security Card (copy only) \_\_\_\_\_

Immunization Record \_\_\_\_\_

**EARLY REGISTRATION ENDS MAY 15, 2026**

*All students registered before May 15th will have the \$150 registration fee applied to their first month's tuition.*



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# EPIPHANY EPISCOPAL SCHOOL

## Application Procedures

1. Complete the Epiphany Episcopal School (EES) registration packet and return it to the EES office with a \$150 registration fee. Interviews will be scheduled once the complete packet is submitted.
2. New EES students must provide a copy of their birth certificate, social security card, and current immunization record.
3. Returning students must have all tuition and fees incurred during the preceding year paid in full to be considered for re-admission.

## Provisions for Enrollment

1. All immunizations must be completed by the first date of attendance. A student may be enrolled provisionally if the student has an immunization record that indicates the student has received at least one dose of each specified age-appropriate vaccine required. To remain enrolled, the student must complete the required subsequent doses in each vaccine series on schedule and as rapidly as is medically feasible and provide acceptable evidence of vaccination to the school.  
\*Texas Law allows (a) physicians to write a medical exemption statement for a medical reason prohibiting the individual from receiving specific vaccines and (b) parents/guardians to choose an exemption from immunization requirements for reasons of conscience, including a religious belief.
2. Children enrolled in EES must be completely toilet trained, without pull-ups, by the beginning of the school year.
3. The school reserves the right to insist upon immediate withdrawal of any student whose presence in EES is considered detrimental to the student's or the school's best interest as an educational institution.

## Annual Fees Summary

Like other private schools that do not receive federal funds, EES depends on tuition and fundraising to maintain financial stability. Each fall, Epiphany hosts a raffle where parents, teachers, and administrators are required to sell raffle tickets. \*If you would like to opt out of selling raffle tickets, \$50 will be added to each month's tuition.

## **Registration Fee: \$150**

## **Tuition**

<b>Plan</b>	<b>Time</b>	<b>Monthly Tuition</b>	<b>Monthly Tuition</b> (Opting out of raffle)
Half Day	8:00AM-12:00PM	\$490.00	\$540.00
Full Day	8:00AM-3:00PM	\$575.00	\$625.00

## Fundraising Participation

\_\_\_\_\_ I would like to opt out of selling raffle tickets and agree to pay the monthly fee of \$50.  
*Initials*

Initials \_\_\_\_\_





# EPIPHANY EPISCOPAL SCHOOL

## Financial Policy

Tuition, as set by the Board of Trustees, is payable on a ten-month basis from August through May. The first tuition payment and all fees must be paid by August 10th. Tuition may also be paid by semester or in full for the year.

All tuition and fees acquired during the school year will be recorded and billed by Brightwheel. If you wish to use a credit/debit card instead of linking a bank account, a 3% service fee will be applied.

1. Paid-in-Full Discount: A 5% discount will be awarded for tuition paid in full in advance by July 31st.
2. Sibling Discount: Families with more than one child enrolled at EMS will receive a 10% discount on the second child.
3. Service Discount: A 10% tuition discount will be granted to all military personnel and first responders.
4. Scholarships: Applications are available at **factsmgt.com**
5. Early Withdrawal: If a student withdraws before the school year starts, tuition is refundable if the class in question is full.
6. Withdrawal: We require at least thirty (30) days written notice to the school office if a student is to be withdrawn. Failure to give said notice will result in one month's tuition assessment. All school records will be withheld until one month's tuition is assessed and any outstanding tuition, fees, or other charges are paid in full. If the final payment is made by personal check, all records, including but not limited to report cards, will be held until the check has cleared the bank. If an account is eligible for any refund, all refunding decisions may be reviewed and acted upon by the Board of Trustees.
7. Late Fees: A \$30.00 late fee will be assessed on all payments received after the 10th of the month.
8. Account-in-Arrears: If a monthly account falls thirty (30) days in arrears, students will not be permitted to attend classes or receive progress reports and/or report cards until the account is paid and made current.
9. Insufficient Funds: A \$40 fee will be charged for each check that is returned from the bank declared "Insufficient Funds/NSF" or written on a CLOSED Account. After two returned checks, payment for tuition, fees, or other charges may only be made in the form of cash, cashier's check, or a bank or postal money order.
10. Overtime Charges: Overtime is considered after 12:00pm for half-day students and after 3:15pm for full-day students. The rate for overtime is \$5/hour until 5:30pm. After 5:30pm a fee of \$2.00/minute will be assessed.

## Hot Lunch Program

Lunches- Per Day:           **\$5.00 (includes milk)**

                  Billed Monthly: **\$75.00**

                  Milk Only:         **\$0.75**

1. All lunches and milk will be charged daily and will be posted to the parents' statement the following month.
2. Lunch count is taken by 8:15am.
3. Hot lunches are ordered from the Kingsville School District by 8:30am.
4. Parents of students who arrive late must inform the office if a hot lunch or milk is needed by 8:30am.
5. Parents of students who arrive after 8:30am will be responsible for providing lunch for their children.
6. KISD provides menus, which are subject to change without notice due to the availability of items.
7. Parents must inform the school office at the time of enrollment if their student has any food allergies.
8. Students who do not wish to eat a hot lunch must bring a lunch from home.
9. Students do not have access to refrigeration or microwaves.

Initials \_\_\_\_\_





## EPIPHANY EPISCOPAL SCHOOL

### Extended Care Program

Hourly (3:15-5:30pm)	<b>\$5.00/hour</b>
Billed Monthly	<b>\$165/month</b>
Overtime (After 5:30pm)	<b>\$2.00/minute</b>

Hourly Extended Care and overtime charges will be billed daily and posted to the parents'/guardians' statement the following month.

### Extended Care Summary

1. Children must be enrolled in Epiphany Episcopal School.
2. All school rules apply during the extended care program.
3. The school does not provide snacks for those children enrolled in extended care. The parent/guardian is responsible for providing an appropriate and healthy snack for their child(ren).
4. Children will be dismissed through the playground gate. Parents/guardians must message via BrightWheel when they arrive at the school.
5. Extended care is unavailable when school is not in session (holidays/teacher in-service, etc.)

Initials \_\_\_\_\_





# EPIPHANY EPISCOPAL SCHOOL

Child(ren) applying for admission:

First Name	Last Name	Social Security	Birth Date	Grade	M/F	Half Day/ Full Day

**Street Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
*(if different)*

**City/State/Zip:** \_\_\_\_\_

**Primary Phone:** \_\_\_\_\_

Applicant lives with:     Both Parents     Mother     Father     Parent & Step-Parent     Guardian

Is there a custody agreement in place for this child(ren)?    Yes    No

If yes, do you have the legal right to make educational decisions for this child(ren)?    Documentation is required.

**Mother/Guardian Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*(if different from above)*

Place of Employment: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Father/Guardian Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*(if different from above)*

Place of Employment: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Extended Care Enrollment:**     Hourly     Monthly     NA

**Tuition Payment Preference:**     Monthly     Semi-Annual     Annually



# EPIPHANY EPISCOPAL SCHOOL

## Emergency Contact and Medical Information

In the event that I/we cannot be reached, the following persons are authorized to pick up my child(ren).

Name	Primary Phone Number	Relationship

Please list any medical conditions that your child(ren) has, such as allergies, existing illnesses, previous serious illness, injuries, hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information of which EES should be aware.

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## Authorization for Emergency Medical Attention

In the event that I/we cannot be reached to make any arrangements for emergency medical attention at the time of an illness or accident, I/we hereby authorize the Head of School or other school personnel to take my/our child(ren) to

\_\_\_\_\_, at \_\_\_\_\_ or  
*Name of Primary Physician* *Primary Physician Address*

\_\_\_\_\_, at \_\_\_\_\_  
*Name of Emergency Medical Care Facility* *EMC Address*

or to the nearest hospital for treatment.

I give consent for Epiphany Episcopal School to secure any and all necessary emergency medical care for my child(ren).

\_\_\_\_\_  
*Parent/Guardian Signature*

\_\_\_\_\_  
*Date*





# EPIPHANY EPISCOPAL SCHOOL

## Photo/Image Release

I/we permit photos and/or images of my child(ren) captured through video, photo, and digital camera to be used in connection with all EES academic and non-academic activities, including the website and any and all school publicity. I/we understand that all photos and/or images will become the property of EES. I/we further understand and agree that I/we waive all present or future compensation rights to using said photos and/or images. In addition, I/we understand and agree that children attending field trips may be photographed or videotaped by news media beyond the control of EES.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## Walking Field Trip Release

My child(ren) has my permission to travel with his/her/their classroom teacher(s) and classmates on school-approved field trips during the school year.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

*Teachers will send a separate permission slip for any field trips requiring transportation. Parents/guardians who volunteer to drive on field trips must keep a copy of their driver's license and proof of insurance on file in the school office.*

## Parent(s)/Guardian(s) Agreement

By signing below and with my initials on the pages of this document, I hereby wish to submit an application for enrollment for my child at Epiphany Episcopal School. I have read and understood the EES Registration Packet. I know that for my child to be enrolled at EES, I agree to abide by the provisions, policies, rules, and regulations adopted by EES, including, but not limited to, those included in the Parent Handbook and such other policies as may be adopted and amended periodically by EES. I further acknowledge that I take full financial responsibility for any tuition and fees that my/our child's enrollment incurs, including but not limited to the fundraising participation agreement.

I understand that the school believes that a positive and constructive working relationship between the school and the parent/guardian is essential to the fulfillment of the school's mission. I agree to support EES' mission, its curriculum, administration, faculty, and staff. I agree to bring any criticism or concerns directly to the appropriate authority (teacher or administrator), depending on the nature of the concern. I acknowledge that EMS has the right to require the withdrawal of any student at any time if the student's behavior or academic achievement does not meet EES' standards or when the conduct or cooperation with EES authorities of either the student or the parent or guardian is not within EES' standards.

I understand and agree that for EES to provide a quality educational institution for all students, I must take full responsibility for and provide my support in assisting the school faculty and staff in maintaining an atmosphere conducive to intellectual, physical, emotional, and spiritual growth.

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date





# EPIPHANY EPISCOPAL SCHOOL

## **Grandparents & Special Friends/Family Members**

The following information is needed for special events and other mailings. Special friends/family members can be any adult you, as a parent/guardian, feel is important in your child(ren)'s life.

### **Paternal Grandparents**

Name	
Address	
Phone	

### **Maternal Grandparents**

Name	
Address	
Phone	

### **Special Friend/Family Member**

Name	
Address	
Phone	

### **Special Friend/Family Member**

Name	
Address	
Phone	

