



Re-Registration Contract 2026-2027

St. James School
120 Water Street
Danielson, CT

This contract between St. James School and the parent(s)/guardian/financially responsible party for payment of tuition and fees, for the child(ren) named below, sets out the financial obligation in order to enroll and maintain the enrollment of the students listed below. The parent(s)/guardian/financially responsible party enters into this financial agreement freely and with the understanding that this contract is a legal obligation.

It is my intention for the child(ren) listed to attend St. James School in the 2026-2027 school year. I intend to follow all the rules and policies of St. James School regarding information and payments:

- ⇒ The registration fee is \$175.00 for each family and is due along with this paperwork. This is non-refundable.
- ⇒ Any outstanding balance owed to St. James School must be paid by June 30, 2026 or your child(ren) may not be allowed to attend St. James School in the fall.
- ⇒ I must complete an online FACTS Payment Plan Agreement at online.factsmgt.com/signin/3JJ9R
- ⇒ I understand that tuition payments and fees are non-refundable.
- ⇒ I understand that tuition must be paid through the FACTS Payment Plan.
- ⇒ Each family is **required** to be involved in the **Development** activities that financially help support the school, and is required to generate \$500 in fundraising sales including volunteer hours. Families will be expected to pay if the Development requirement is not met.
- ⇒ All families of St. James School students are **required** to volunteer 10 hours of service at fundraising events throughout the school year. Families will be charged a rate of \$15.00 per hour for incomplete hours.

By signing below, I understand and agree to all the terms and conditions listed above, and I acknowledge that I have reviewed the current financial policies available on the St. James School website.

PLEASE COMPLETE THE ENTIRE FORM:

Responsible Party (s): _____
First Name Last Name Circle One: Mother Father Guardian

Home Address: _____
Street City State Zip

Home Telephone: _____ **Cellphone:** _____ **Email:** _____

Are there any custody issues of which St. James School should be aware? ___Yes ___No. If yes, please explain:

Affiliated Parish: _____

Signature: _____ **Date** _____

Please Print Clearly	
Child's First and Last Name	Grade for 2026-2027

Tuition 2026-2027	K-8 Catholic Subsidized	K-8 Non-Catholic and Catholic-Nonsubsidized
1 student	\$4,525	\$5,275
2 students	\$8,250	\$9,750
3 students	\$11,375	\$13,625

<i>For Office Use Only:</i>		
Registration Fee: \$ _____		
Check # _____	Cash _____	Date: _____
Collected by: _____		

Preschool Tuition	5 Full Days	5 Half Days	3 Full Days
2026-2027	\$7,050	\$4,650	\$5,900
Child will attend:			

Please return this form and the registration fee to the school office by March 5, 2026 to reserve your student(s) spot.