



ST. MICHAEL CATHOLIC SCHOOL

2025-2026 ACADEMY OF ANGELS REGISTRATION

Student First Name: _____ Last Name: _____

Birth Date: _____ Gender: Male Female

Address: _____

Public School District: _____

Ethnicity: Caucasian Hispanic/Latino Black/African American Asian Multi-Racial Other: _____

Is Student Catholic? Yes No Is Student Baptized Catholic? Yes No

Check Any Statements that are TRUE for your child:

- ☐ Has attended a daycare/preschool program: Where? _____
- ☐ Is receiving speech and language services (please provide a copy of speech/language plan)
- ☐ Is on an IEP (please provide a copy of the current plan to the school)
- ☐ Is suspected of having a behavioral issue that may impact his/her schooling
- ☐ Is suspected of having an academic concern that may impact his/her schooling
- ☐ Has custody documentation forms (please provide a copy of the current plan to the school)
 - ☐ Custodial Parent is: _____
- ☐ Has a food allergy: Explain: _____

Father First Name: _____ Last Name: _____ Salutation: Mr. Dr.

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email: _____

Religious Denomination: _____

Mother First Name: _____ Last Name: _____ Salutation: Mrs. Ms. Miss Dr.

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email: _____

Religious Denomination: _____

Register Child For:

- ☐ 2-Day Preschool (*turn 3 by July 31, 2025*) Tuition Rate - \$1275
- ☐ 3-Day Preschool (*turn 4 by May 31, 2026*) Tuition Rate - \$1725
- ☐ 5-Day Preschool (*turn 4 by July 31, 2025*) Tuition Rate - \$2825
- ☐ Kindergarten Readiness (*turn 4 by July 31, 2025*) Tuition Rate - \$5650
 - ☐ I will pay tuition in full
 - ☐ I will apply for tuition assistance through FACTS

\$50 non-refundable or \$150/family registration fee is required at the time of registration for students enrolling in the Academy of Angels for the first time. There is no fee for returning students.

CONTINUE ON BACK TO COMPLETE REGISTRATION FORM



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Documentation Needed to Register for First-Time Students:

- ☐ Copy of birth certificate
- ☐ Copy of social security card
- ☐ Copy of baptismal certificate (if Catholic and not baptized in St. Michael Parish)

Yearly Documentation Need for All Students:

- ☐ Physical - Each student enrolled in Academy of Angels classes must have a current physical signed by a physician on file before school begins. Forms can be found on the school website or in the office.
- ☐ Copy of immunization records
- ☐ Final Forms (will receive email to complete after enrollment)

Payment Options:

- ☐ Single Payment by cash or check. Tuition must be prepaid by **June 15, 2025**. All tuition paid in full after this date will be increased by \$100.
- ☐ Monthly Electronic Funds Transfer (\$25 yearly fee). **Please complete a new EFT form yearly.** Payments will be taken July 20th-April 20th, or until the balance is paid in full.

Tuition Agreements:

- ☐ \$50 non-refundable or \$150/family registration fee is required at the time of registration for students enrolling in the Academy of Angels for the first time. There is no fee for returning students.
- ☐ An additional \$50 materials fee will be charged/student in Academy of Angels classes for withdrawing after June 30, 2025.
- ☐ If my student withdraws from school from July 1, 2025 - the end of the school year, I will receive a partial tuition refund on a semester basis.

Students are considered registered upon receipt of the registration form and fee to the school office unless you receive a call that your child has been placed on a waiting list.

Parent/Guardian Signature: _____ Date: _____

Office Use Only: Date Received: _____ Deposit: \$ _____ check# _____ cash _____ DB entered _____