



534 FRONT ST. CHICOPEE, MA – 413-592-5135 – SAINTSTANSSCHOOL.ORG

STUDENT RE-REGISTRATION 2020 - 2021

STUDENT INFORMATION

Last Name:		First Name:		Middle Name:	Grade entering in 2020-2021 SY:
Birth Date: / /		Child's Race (Responses not required, but encouraged) <input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Black (Not of Hispanic Origin) <input type="checkbox"/> White (Not of Hispanic Origin) <input type="checkbox"/> 2 or more races			Busing Required? (Chicopee Only) <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary Phone #:				Primary Email (REQUIRED):	
Student Lives With: <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Mother & Stepfather <input type="checkbox"/> Father & Stepmother <input type="checkbox"/> Other: _____					

FAMILY INFORMATION

PARENT 1				
Last Name	First Name	Middle	Email Address	Primary Phone #
PARENT 2				
Last Name	First Name	Middle	Email Address	Primary Phone #
SIBLINGS				
Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:	School:	
Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:	School:	
Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:	School:	

AGREEMENTS

TUITION AGREEMENT

Individual Responsible for Payment of Tuition and Fees

Name:	Relationship:	Primary Phone Number:	Primary Email Address:
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Please provide address if different than student's address

Address (P.O. Box if applicable):	City:	State:	Zip Code:
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In registering my child(ren), I agree to meet the FINANCIAL COMMITMENTS and FAMILY SERVICE COMMITMENT HOURS required by St. Stanislaus School. Further, I (we) agree to abide by the guidelines established in the school handbook and recognize that failure to do so could result in dismissal.

Signature of Person Responsible for Tuition

Date

PHOTOGRAPHY AGREEMENT (USE OF IMAGES ON FACEBOOK OR OTHER PUBLICATIONS)

I, the undersigned, **DO CONSENT** or grant full permission for St. Stanislaus School to use the names or likeness of my child(ren) for news releases, media and promotional activities. This request is valid for the current school year, 2020-2021.

I DO NOT give consent or permission for St. Stanislaus School to use the names or likeness of my child(ren) for news releases, media and promotional activities or posting to social media. This request is valid for the current school year, 2020-2021.

Parent or Legal Guardian Signature

Date



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ST. STANISLAUS SCHOOL FAMILY AGREEMENT

In order to enhance the academic and extracurricular experiences of every child enrolled at St. Stanislaus School, we must work together as parents, students, and school personnel. We want your time as a student at St. Stanislaus School to be one with a clear understanding of our expectations of you and for all.

As a member of the St. Stanislaus School community, you agree to:

1. support and encourage the Catholic-Christian Gospel values that are central to the philosophy and mission of St. Stanislaus School;
2. support the rules and regulations detailed in the Parent/Student Handbook (available on the School Website)
3. respect all school personnel and students;
4. understand the importance of being present at school on a daily basis and arriving on time;
5. As a student, I will perform academically to the best of my ability and complete all assignments on time.

With my signature, I agree to follow the terms listed above in the St. Stanislaus School Agreement. I understand that this contract is real and will be enforced. St. Stanislaus School reserves the right to amend this Student Agreement.

Student Signature Parent or Legal Guardian Signature Date

CHANGES

Have you made changes to any of the following:

Student's Primary Address	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide the student's primary address: Name: New Address: City/State/Zip Code:
Parent Address or Phone #	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide all parent addresses that are different than the student's address: Name: New Address: City/State/Zip Code: Phone # Work #
Legal Guardian or Custodial Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	If applicable, please provide a copy of the custodial order.
Parent Employer	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide: Company Name: Phone # Extension (If Applicable):
Medical Information	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide documentation to the school nurse.
Parishioner Status	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide: Name of Parish:
Emergency Contacts	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide: Name: Phone #:

CONNECT-ED EMERGENCY INFORMATION

The Connect-Ed Emergency Automated Phone and Email System information for our family:

is unchanged please change the following:

Home Phone #	Cell Phone #	Email
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I have read the above and changed all applicable items for my student for the 2020 – 2021 school year and agree to keep the School informed of any changes that occur during the school year.

Parent or Legal Guardian Signature Date

St. Stanislaus School is a Roman Catholic, Franciscan, co-educational Pre-K through 8th grade school. Students are assisted in developing their potential spiritually, physically, and socially within a safe and diverse community. A foundation of academic excellence is created to prepare students to become contributing members of a global society.