

Inspiring Achievement; Instilling Faith

# 2024-2025 Registration Forms

#### **Mission:**

St. Ann's Academy exists to provide a Catholic education in the Hornell area so that our children can learn in an environment that enables them to become well-grounded spiritually and exceptional academically.

#### **Our Vision:**

St. Ann's Academy inspires achievement and instills faith in its students and others who support its mission. We manage our resources well so a quality education is affordable to all families in the area who want their children to have a faith-based education that can provide a sound emotional and spiritual foundation for life.

St. Ann's Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

### **Registration Fee and Due Date**

Please complete and return all attached registration forms with the nonrefundable registration fee, before March 29, 2024.

Registration fee	\$150	Due by March 29, 2024
Late registration fee	\$200	After March 29, 2024

#### **Notes:**

- 1) Registrations are handled on a first come, first served basis, with priority given to full time students and returning students.
- 2) There is one registration fee per family.
- 3) Registration fees apply to all new and returning families.
- 4) Registration fees are non-refundable.
- 5) Students needing free busing must adhere to the March 18 registration deadline to ensure that the public school district that is responsible for busing them can schedule accordingly.
- 6) Please return the entire registration packet to: St. Ann's Academy PO Box 446, Hornell, NY 14843
- 7) **Questions?** Contact: Barb Berry, SAA Principal at (607) 281-1010 or barb.berry@saacademy.org

### **Tuition Schedule 2024-2025**

	<b>Tuition per student</b> (For three or more children, see note 4)	10-Month Payment Plan
Pre-K (full day)	\$4250 / year	\$425
K – 6 <sup>th</sup> Grade	\$3650 / year	\$365

#### **Notes:**

- 1) All Students **must** be completely bathroom trained to attend. Reliance on pull-ups or diapers is not permitted.
- 2) Half-day Pre-K students are welcome but unfortunately can only be accommodated if there is space available after full-time students are registered. Tuition for half-day students is \$3,050 per year.
- 3) Pre-K and Kindergarten payments may be deductible as child care expenses when filing tax returns, provided both parents work. Consult your accountant or IRS filing instructions.
- 4) Tuition assistance may be available in cases where tuition payments would present a hardship to the family. If this is the case, please submit a request in writing as soon as possible for confidential consideration by the Board of Directors, who will use federal poverty level income guidelines and the availability of tuition-assistance funds as the basis for aid.
- 5) Tuition discounts are available to families with three or more children attending. In these cases, the first two children are charged at the normal rate and the third child is charged at  $\frac{1}{2}$  the normal rate. If a family registers more than three students, there is no additional tuition due.

### **Payments**

- Make checks payable to <u>St. Ann's Academy</u> and mail it to P.O. 446, Hornell, NY 14843.
- Credit or debit card payments are accepted at www.saacademy.org Just click "Pay Tuition" on the homepage. Be sure to include the student's name to ensure proper application of the payment.



# Registration Form 2024-2025

	Child N	ame	Entering Grade	Date of Birth	<b>Previous School Attended</b>
	Name				
r /	Address				
Mother ,	Email Address				
Mo	Phone / Cell				
	Place of Employment				
	Name				
/ Ji	Address				
Father /	Email Address				
Fa	Phone / Cell				
	Place of Employment				
Emer	gency Contact In	<u>formation</u>			
1) Nar	me			Phone (Dayti	me)
Relatio	onship to Student _				
2) Nar	me			Phone (Dayti	me)
Relatio	onship to Student _				
Child	/ Children Live Wi	th			

Brothers and Sisters	[	Date of Birth	Grade / School Attending
chool District of Residence			
ick-Up Authorization In the event an			ed must pick up my child(ren),
ill call the school in advance to give verb	al authoriz	ation.	
Name		Rela	tionship to Child(ren)
			, ,
<u>edical Information</u>			
nild(ren)'s Physician		Off	ice Phone
ldress			
Street	City, Sta	ate	Zip
edications / Allergies / Additional Inform	ation		
neck here:			
My child(ren)'s immunizations	are up-to	-date.	
nmunization records and most recent He		-	ovided before the start of the
24-2025 school year for all new student	s per New	York State.	
Parent/Legal Guardian's Signature			Date
Parent/Legal Guardian's Signature			Date
neck one of the following (required):			
I give permission for my chil	d(ren) to h	e photographed	d/filmed for use in SAA
publications, including, but not limit	ted to publ		
DO NOT photograph my chil	d.		



## **Request for Transportation (Grades K-6)**

Submit to St. Ann's Academy when registering but no later than March 18, 2024. Student Name(s) Parent Name(s) Home Address Telephone **Email Address** AM Busing Departure Location: PM Busing Destination: Parent/Legal Guardian's Signature Date



# **Records Request**

I give my permission for the		
	School District	
to release all records pertaining to my child(ren), _		
Student Name(s)		_ to St. Ann's Academy.
Printed Name		
Parent/Legal Guardian's Signature		 Date
rareny Legar Guardian's Signature		Date
Please forward all information to:		
St. Ann's Academy PO Box 446		

Hornell, NY 14843 <a href="mailto:barb.berry@saacademy.org">barb.berry@saacademy.org</a>

### PARENT/GUARDIAN AUTHORIZATION FOR LOAN OF TEXTBOOKS FORM

Student Name			
Student's Address			
Name of Public School District residing in:			
Name of Nonpublic School attending:	St. Ann's Academy		
	,		
	LOAN OF TEXTBOOKS		
I hereby request the Loan of Textbooks in the na	me of:		
	(Student's Name)		
authorize  St. Ann's Academy  to act on behalf of this student in identifying and ordering books to be loaned to  (Non Public School)			
the student identified above, and residing in the	school district above. Textbooks must be maintained in good condition. Replacement		
of damaged or lost textbooks, are the responsibil	lity of the student.		
SIGNATURE OF PARENT OR GUARDIAN:			
	DATE:		
I certify that the students above are students in o period of one semester or longer.	our school and that the textbooks that they request are required by said students for a		
Signature of Nonpublic School Official	Date		
Phone Number 607-281-1010			
District Verification	Date		

Keep this form on file at the nonpublic school for the individual school districts for the duration of the student enrollment

### **Care and Return of SAA Property**

To help with their development, students may be issued/loaned Information Technology (IT) devices such as tablets (e.g. i-pad) or notebook computers (e.g. Chromebook), or other equipment or learning materials. We hereby promise to take appropriate measures to protect loaned school property from damage, loss or theft. In the event of neglect, preventable damage, loss or preventable theft, I promise to pay for replacement of the items in-kind.

Parent/Legal Guardian's Signature	Date
Parent/Legal Guardian's Signature	Date



### **Student Illness Policy**

The intention of this policy is to provide a healthy and safe environment for our students. Some illnesses and situations require a child to be absent from school to prevent the spread of infection to other children and to allow the child time to rest, recover and be treated for the illness. In order to help keep our children and staff healthy, St. Ann's Academy requires adherence to the guidelines of this policy.

Children will not be allowed to attend school or school related activities if they have anything contagious such as, but not limited to the following:

- **COVID:** Students must be symptom free before arriving at school. If the student has been exposed or prolonged symptoms the parent will assume responsibility.
- **FEVER**: May return when fever free (under 100 degrees) for complete 24 hours, without medication.
- **DIARRHEA / VOMITING**: May return when symptom free for a complete 24 hours.
- **STREP THROAT**: May return after 24 hours after first dose of antibiotic treatment and no fever for 24 hours.
- **CONJUNCTIVITIS** (pink eye): May return 24 hours after treatment begins and eyes are free of discharge.
- RASH: May return after consulting and being cleared by their medical professional.
- **HEAD LICE**: May return after treatment and removal of all live lice and nits from hair.
- **RING WORM**: May return after treatment begins; area should be covered while in school for first 48 hours of treatment.
- COMMUNICABLE DISEASES (such as, but not limited to influenza, chickenpox, measles, mumps, pertussis, meningitis, mononucleosis): May return when cleared by their medical professional.
- **Uncontrolled Cough:** Your child may not return until the cough is controlled.

If a student arrives at school with symptoms, or during the school day begins to show symptoms indicative of a condition listed above, a parent/Legal Guardian will be contacted and asked to pick the child up as soon as possible.

Continued on next page

The parent/Legal Guardian needs to maintain direct contact with the school and the student's teacher if the child is diagnosed with any communicable disease so the school can take appropriate steps to protect the entire student population.

If a student loses consciousness and/or suffers a serious injury, 911 will be called so that professional medical care can be provided immediately. Parents will be notified as soon as possible.

<b>Acknow</b>	vledg	ement
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Acknowledgement	
I(We) have received and read the above Student Illness Pocommit to follow this policy as it relates to my child(ren).	d and read the above Student Illness Policy. I understand it and is policy as it relates to my child(ren).
Parent/Legal Guardian's Signature	Date
Parent/Legal Guardian's Signature	 Date

### **Tuition Agreement 2024-2025**

The cost to educate a child at SAA exceeds \$7500. The Board of Directors strives to keep tuition affordable by being fiscally conservative, but they also need families to be involved in fundraising activities which also keep costs down. By our signatures below, we promise to pay the full amount of the tuition shown below according to the schedule shown.



	Parent/	Legal Gu	uardian		Paren	t/Legal Guardian
Parent Name						<u>,, ., ., ., ., ., ., ., ., ., ., ., ., .</u>
Address						
City, State & Zip						
Phone						
Monthly (	<b>Payment</b> - ful <b>10-Month)</b> - c	II paymei lue on th	nt due 8/1/24 ne 1 <sup>st</sup> of each mon	ith	cone): beginning 8/1/24 ane second payment	_
Name of St	udent	Grade	<b>Tuition Amount</b>			
					Payment Option	Payment Amount
					· uymom opnom	- aymone yamoun
	Total Tuit	ion Due				
not received by for two consecutives, and moderate withdraw prior Due. In the case	y the 6th of the cutive months, y/our child(rend) to the end of	e month a our acco n) may be the scho count is r	are subject to a \$2 ount will be referre e removed from S ol year I/We agre	0 la ed st. a e t	understand that tu late fee. If payment to the SAA Board of Ann's Academy. If to pay the balance of as for non-payment,	is not received of Directors for I/We decide to of Total Tuition
Parent/Le	egal Guardian's	Signatuı	re			Date
Parent/Le	egal Guardian's	Signatui	re			Date
SAA Rep	resentative					 Date

# **Registration Checklist**

 Item Description	Page #	Due Date
Registration Packet		3/29/24
Registration Form and nonrefundable fee	3-4	3/29/24
Transportation request	5	3/18/24
Records Request	6	Upon registration
(if transferring from another district/school)		
Parent/Guardian Authorization for Loan of	7	Upon registration
Textbooks		
Care and Return of SAA Property	8	Upon registration
Student Illness Policy	9-10	Upon registration
Tuition Agreement	11	Upon registration
Health / Immunization records		asap but no later than 8/12/24