

REGISTRATION INSTRUCTIONS 2025-2026

Welcome to St. Peter the Apostle Catholic School!

Mission Statement

St. Peter the Apostle School is dedicated to academic excellence and devoted to nurturing courageous leaders rooted in prayer, community, and service.

Whether you are a new or returning family, please know that we are grateful that you have chosen us to be partners with you in educating your children.

Please read and/or sign the following documents:

- Tuition Rates/Fees
- Tuition & Policy Agreement
- Financial Commitment - You must SELECT A PAYMENT OPTION or the 10 Month plan will be selected for you.
- Family/Student Registration Information—(please complete both sides)
- FACTS Form-Only new families need to register on-line with FACTS
<https://online.factsmgt.com/signin/48C8H>.
 - o Returning families are automatically re-enrolled with FACTS.
- All immunizations & birth certificate MUST be turned in at registration to ensure your child is enrolled.
- Include a Registration check for \$250 per child/ or a minimum \$100 per child to hold your spot. The balance will be automatically added to your FACTS agreement in May.

Changes for the 2025-2026 School Year

- Due to limited space in each grade, returning families need to hold their spot for next year by February 28th with a \$100 deposit per child
- We will have 2 Preschool rooms that will accommodate 48 students including 6 spots for 2-year-olds
- Current family registration fee will be \$350 after March 28th (if space is still available)
- Open Registration begins on March 3rd

Scholarship Eligibility

- You must first submit a completed School Registration packet and pay the Registration Fee
- Scholarship availability is limited. Please submit letter to review scholarship eligibility no later than March 4th
- All families need to pay an increase in their tuition rate this year to assist with operational costs.

For NEW FAMILIES: Please include the following documents:

- Birth Certificate
- Baptismal Certificate
- Immunization Record
- Report Card

Please tell a friend, relative, or neighbor about St. Peter the Apostle Catholic School! You will receive a \$250 Scrip Referral once they register and stay for at least 60 days.

2025-2026 Tuition Rates & Fees

K-8 Student Annual Tuition: \$6450

Actual Per Pupil Cost: \$11,000

K-8 Students	10 Monthly Payments	11 Monthly Payments	12 Monthly Payments
1 st Child	\$645.00	\$587.00	\$538.00
2 nd Child (15% Discount)	\$549.00	\$499.00	\$457.00
3 rd Child (20% Discount)	\$516.00	\$469.00	\$430.00
4 th Child (25% Discount)	\$484.00	\$440.00	\$403.00
5 th Child (50% Discount)	\$323.00	\$294.00	\$269.00

	PRESCHOOL (2-Year-olds) 6 Spots available			PRE-K 1 (3-Year-olds)			PRE-K2 (4-year-olds)	
	5 days	4 days	3 days	5 days	4 days	3 days	5 days	4 days
Full Day: 7:30-5:00	\$925	\$900	\$875	\$825	\$800	\$775	\$800	\$775
Half Day: 8:00-12:30	\$825	\$800	\$775	\$725	\$700	\$675	\$700	\$675
Please circle days		M,T,W,Th,F	M,T,W,Th,F		M,T,W,Th,F	M,T,W,Th,F		M,T,W,Th,F

Registration Fee (per student) (Non-Refundable) - Must be paid in full by June 1st

Registration (may pay \$100.00 per child to hold spot) \$250

Registration for returning families after April 28th \$350

The Following Fees Must Be Paid In Full By Due Date Or Will Be Added to Your FACTS

Technology Fee- DUE: Sept. 1 (ALL STUDENTS) (Non-Refundable) \$100

K-8 Materials/Yearbook Fee Due: Sept 1st (ALL STUDENTS-Non refundable) \$50

Sacrament Fee-DUE: Nov. 1 (First Communion/First Reconciliation) \$100

Diocesan Service Fee- Due: Sept 1 (ALL STUDENTS) (Non-Refundable) \$25

Pre-K Materials Fee- Due Sept 1 (Non-Refundable) \$50

Grade 6 Camp Fee- DUE: Feb. 1 \$400

Grade 8 Graduation - DUE: March 1 \$400

ALL Tuition Payments must be processed through FACTS

1 Payment: 1/2 due by July 1st balance due by Aug 5 FACTS FEE: \$5

2 Payments: due by August 5 /January 5 FACTS FEE: \$15

10, 11, or 12 Payments: all payments must be complete by June 20 FACTS FEE: \$50

- Tuition income alone does not cover all operating expenses. We rely on YOUR participation in all the fundraising events/activities. There are usually 4 required fundraisers throughout the year and all families-preschool through grade 8 are required to participate. Buy out for fundraisers is \$1,000.00.
- All families are expected to purchase Scrip every month (\$50.00 minimum or \$500.00 buy-out). Buy out by 9/30.

Attention Preschool families

- Children must be potty trained by 9/1 or there will be a \$100 per month additional charge



Family Name _____

2025 - 2026 TUITION & POLICY AGREEMENT

Philosophy

St. Peter the Apostle Catholic School is an integral ministry of our Parish. Catholic values are interwoven into a comprehensive curriculum relevant to the Gospel. Recognizing and encouraging parents as the primary educators and teachers as facilitators, students are empowered to take responsibility for their learning and challenged to reach their individual potential. St. Peter the Apostle Catholic School teaches *Traditional Values, Today's Technology, and Tomorrow's Leaders!*

Parent Expectations _____ initial

- It is essential to our mission that families attend Saturday/Sunday Mass on a weekly basis.
- Parents are expected to Role model to your children the act of giving your time, talent, and treasure
- Regular, consistent giving to the parish/ other Catholic charities is expected.

Parent Participation _____ initial

- Fundraising in our Catholic school is essential because the tuition dollars alone are not sufficient to cover all expenses. There are usually 4 required fundraisers throughout the year where all families—Preschool through Grade 8 are required to participate. If you do not attend the event, or help with its success, a fundraising fee equivalent will be billed to you. \$1000.00 Buy-Out is also available.
- All families are expected to purchase Scrip every month (\$50.00 minimum purchase or \$500.00 Buy-Out) due by 9/30/25.

Non-Payment of Tuition _____ initial

Chronic delinquencies may result in withholding your child's report card/diploma; your account forwarded to a collections agency; and/or your child not being allowed in the classroom until payment arrangements are made with the principal.

Student Withdrawal _____ initial

If you need to withdraw your student(s), you must provide a 30-day notice in writing to the office. Tuition is not prorated; therefore, you are held responsible for the full month's tuition rate when you withdraw your student(s).

Refund Policy _____ initial

Registration, Technology, Materials, and Diocesan fees are non-refundable. Tuition is refundable, based on the number of unused months of prepaid tuition. Attendance for one day in the month constitutes payment due for the month.

Scholarships _____ initial

Limited assistance based solely on financial need is available to new and currently enrolled students. Please write me a letter stating the amount that you can pay for tuition no later than March 4th for review. Please remember you need to pay increased amount due to higher operating costs. This does not guarantee you will get financial assistance. You will receive notification of the amount available by April 15th.

Tuition _____ initial

By July 5th all families must pay 50% of August's tuition. August is the 1st months tuition for 2025-2026.

Handbook _____ initial

Parent and student understand and agree to adhere to the policies.

Special Needs

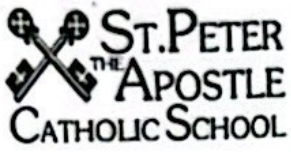
St. Peter the Apostle Catholic School recognizes that we may not be able to accommodate students who demonstrate severe grade level deficiencies or behavioral problems. We will make every effort to assist with referrals for alternative school placement, if necessary.

Acceptance Statement

I agree to comply with and actively support the Philosophy, Mission, goals, programs, policies and procedures of St. Peter the Apostle Catholic School as outlined in the Parent Handbook, which is available on the school website www.spacschool.com. I agree that the Principal has the right to dismiss a student in the best interest of the student and school.

Parent/Legal Guardian Signature Date

Parent/Legal Guardian Signature Date



2025-2026 FINANCIAL COMMITMENT FORM

Family Name _____

2025-2026 TUITION RATES									
K-8 Student Annual Tuition: \$6450									
K-8 Students	10 Monthly Payments			11 Monthly Payments July-May			12 Monthly Payments July-June		
1st Child	\$645			\$587			\$538		
2nd Child (15%)	\$549			\$499			\$457		
3rd Child (20%)	\$516			\$469			\$430		
4th Child (25%)	\$484			\$440			\$403		
5th Child (50%)	\$323			\$294			\$269		
PRESCHOOL 2 year olds			PRE-K 1 3 year olds			PRE-K 2 4 year olds			
	5 days	4 days	3 days	5 days	4 days	3 days	5 days	4 days	
Full Day 7:30-5:00	\$925	\$900	\$875	\$825	\$800	\$775	\$800	\$775	
Half Day 8:00-12:30	\$825	\$800	\$775	\$725	\$700	\$675	\$700	\$675	

Check ONE	# Payments	Due by	FACTS Fee
1	Annual	½ July 1 st ½ August 5 th	\$5 Annual Fee
2	Semi Annual	Aug. 5/Jan 5	\$15 Annual Fee
10	Monthly	July- April Aug- May or Sept -June	\$50.00
11	Monthly	July-May	\$50.00
12	Monthly	July - June	\$50.00

SUMMARY	
All Tuition must be paid through FACTS	
Total Annual Tuition \$	_____
Total Registration Fee \$	_____
Total Classroom Fees \$	_____
_____ All fees will be added to FACTS	
_____ Technology Fee-\$100 (due Sept 1 st)	
_____ Pre-K Materials Fee (due Sept 1 st)	
_____ K-8 Materials/Yearbook Fee (due Sept 1 st)	
_____ Sacrament Fee-\$100 (due Nov 1 st)	
_____ Diocesan Services Fee- \$25 (due Sept. 1st)	
_____ Camp Fee-\$400 (due Feb 1 st)	
_____ Grad Fee-\$400 (due March 1 st)	
Total Monthly FACTS Amount	\$ _____ for _____ Payments

REGISTRATION/CLASSROOM FEES—(per student)	
Fees must be paid in full by Due Date or will be added to your FACTS agreement	
Registration (Non-Refundable) – Due June 1st	\$250
Registration after April 28th for Returning Families	\$350
Technology Fee- ALL STUDENTS-Due September 1st	\$100
Pre-K Materials Fee – Due September 1st	\$50
K-8 Materials/Yearbook Fee – Due September 1st	\$50
Sacrament Fee - 1 st Communion/ Reconciliation-Due Nov 1st	\$100
Diocesan Services Fee- ALL STUDENTS-Due September 1st	\$25
6 th Grade Camp Fee - Due February 1 st	\$400
8 th Grade Graduation - Due March 1 st	\$400

*\$100.00 non-refundable deposit to hold child's spot.

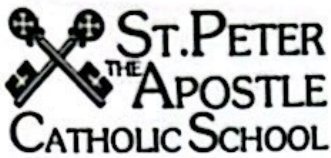
Expectations _____ initial

- It is essential to our mission that families attend Saturday/Sunday Mass on a weekly basis.
- Role model to your children the act of giving your time, talent, and treasure.
- Regular, consistent giving to the parish/ other Catholic charities.

Participation _____ initial

- Fundraising in our Catholic school is essential. Tuition is not sufficient to cover all expenses.
- There are usually 4 required fundraisers throughout the year -- all families—Preschool through Grade 8-- are required to participate. (\$1000.00 Buy out)
- All families are expected to purchase Scrip every month (\$50.00 minimum) or \$500 buy-out by 9/30/25.

FINANCIAL RESPONSIBILITY
Printed Name of person responsible for tuition payments
Signature of person responsible for tuition payments
Social Security Number of person responsible for tuition payments



Family Name: _____

FAMILY/STUDENT REGISTRATION INFORMATION

The following information is required for statistical reporting or Federal Funding allocation purposes. All information is confidential.

STUDENT INFORMATION	1 st child	2 nd child	3 rd child	4 th child
Student First Name				
Student Last Name				
Grade for 2025-2026				
Date of Birth				
Student Religion				
Has he/she been Baptized Catholic?				
Has he/she made 1 st Reconciliation?				
Has he/she received 1 st Holy Communion?				
Health Concerns (asthma, allergies, ADHD, etc.)				
Medications-Does he/she need to take medications at home/at school?				
Student Ethnic Origin (Choose ONE)	<input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown	<input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown	<input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown	<input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown
CATEGORICAL FUNDING- The following information is for Federal Categorical Funding Allocation purposes only.				
What was the child's first language?				
What language does the child use the most?				
What language do the parents use the most with the child?				
What language is used most often in the home by the adults?				
Family Size	Annual Income	*This may be a foster child, emancipated youth, or special education child over the age of 18. For each additional family member, add \$5698. If you are paid on a weekly/monthly basis, please multiply that amount by the number of weeks/months you work each year. Circle your answer to these 3 questions.		
One*	\$16,391			
Two	\$22,089			
Three	\$27,787			
Four	\$33,485			
Five	\$39,183			
Six	\$44,881			
Seven	\$50,579			
Eight	\$56,277	Is your family income less than the amount listed?	YES	NO
		Are you eligible for food stamps?	YES	NO
		Are you receiving TANF Cash assistance/AFDC or public assistance?	YES	NO

PARENT INFORMATION	FATHER'S INFORMATION		MOTHER'S INFORMATION	
First Name, Last Name				
Home Address				
City, Zip Code				
Home Phone				
Work Phone				
Cell Phone				
Occupation				
Employer				
Religion				
Did you graduate high school?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Parish Name where you are registered as a parishioner		Envelope #		Envelope #
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other		<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other	
Email Address Please enter the <u>Main</u> Family email account				
What phone numbers do you want us to use for our <u>One Call Messaging System</u> ? You may enter up to 4 numbers.	Number 1	Number 2	Number 3	Number 4
Check the box if this phone can receive text messages	Text Message? YES <input type="checkbox"/> NO <input type="checkbox"/>	Text Message? YES <input type="checkbox"/> NO <input type="checkbox"/>	Text Message? YES <input type="checkbox"/> NO <input type="checkbox"/>	Text Message? YES <input type="checkbox"/> NO <input type="checkbox"/>

IN THE EVENT OF ILLNESS or EMERGENCY <input type="checkbox"/> CALL MOTHER FIRST <input type="checkbox"/> CALL FATHER FIRST IF WE CANNOT REACH YOU, PLEASE LIST 2 OTHER EMERGENCY CONTACTS.	
Name	
Relationship	
Home Phone	
Cell Phone	

I authorize St. Peter the Apostle Catholic School to provide medical services/treatment for my children in the event of an illness or emergency.

PARENT CONSENT: _____

<p><u>PHOTO RELEASE AUTHORIZATION</u> St. Peter the Apostle Catholic School is authorized to photograph my children for the following:</p> <p>Yes _____ No _____ Yearbook-- to include the annual class photo and other candid photographs for the yearbook <u>ONLY</u></p> <p>Yes _____ No _____ www.spacschool.com, Social media, local newspaper</p> <p>Yes _____ No _____ I do not authorize my child's photograph to be used for any purpose and their picture <u>will not be published</u> in SPACS yearbook.</p>

PARENT SIGNATURE _____ DATE _____



PARENT HANDBOOK POLICIES ACKNOWLEDGEMENT

Family Name _____

Student(s) Name _____

Our family is acknowledging that we reviewed the following topics/policies. By signing we agree to follow and adhere to the guidelines of St. Peter the Apostle Catholic School.

The page numbers noted are the page numbers for each topic/policy in the Parent Handbook. (Please initial each line)

_____ School's Website : <https://spacschool.com/>

_____ Online Parent Handbook: <https://spacschool.com/school-information>

_____ School Supply List: <https://spacschool.com/resources>

_____ Attendance Policy (Page 16)

_____ Cellphone/Electronic Device Policy (Page 20)

_____ Discipline Policy (Page 17)

_____ Rights and Responsibilities of Students (Page 7)

_____ Expectations of Parents (page 27)

_____ Uniform Policy (Page 21)

_____ Bell Schedule (Page 5)

_____ After School Care (Page 6)

_____ Homework Policy (Page 14)

_____ Financial Obligations (Page 7)

Parent Signature

Date