



2315 North Cedar Street Spokane, WA 99205  
509-327-9369  
trinityspokane.org

## 2018-2019 School Year Registration Forms

Trinity Parent or Guardian:

Welcome to Trinity Catholic School! Your child will be nurtured and educated by highly qualified Trinity teachers and staff. Trinity Catholic School and Educare Center is a Christian community based in St. Anthony's and St. Joseph's parishes. We offer solid academic education built on Catholic values and traditions, and formation of a strong relationship with God in a safe environment for people of diverse economic situations and cultures. We strive to enrich the lives of all students and we encourage students to become creative, responsible members of both Church and society.

### Checklist:

- 1. New Student Data Form: New Families or Updates Needed
- 2. Emergency Info-All Families
- 3. FACTS Info Submitted- All Families
- 4. Immunization Record-All Families
- 5. Volunteer Commitment-All Families
- 6. Uniform Agreement-All Families
- 7. Tuition Contract-All Families
- 8. Attendance Policy-All Families
- 9. Internet Usage Agreement-New Families Only
- 10. Final Review-All Families

**ALL the registration requirements must be submitted before being officially enrolled at Trinity Catholic School.**

# **NEW STUDENT DATA FORM**

## **Family Information:**

Student Full Name:	
Student Birth Date:	
Student Address: (Street, City/State/Zip)	
Best Family Email Address:	
Best Student Family Phone #(s):	
Student Birth Place (City, State):	
Student Gender (M/F)	

Father's Full Name:	
Father (circle): Married Deceased Separated Divorced Remarried <u>Father's Occupation: Business Name: Business Phone: Cell</u>	
Phone: _____	
Mother's Full Name:	
Mother (circle): Married Deceased Separated Divorced Remarried <u>Mother's Occupation: Business Name: Business Phone: Cell</u>	
Phone: _____	
Legal Guardian's Full Name:	
<u>Guardian's Occupation: Business Name: Guardian's Business Phone: Cell Phone:</u>	
_____	
Please provide a parenting plan if one is in place to keep in the school office folder.	

## **Previous School Info:**

	Month/Year	Grade	School	City	State
Entered					
Transferred					
Re-entered					
Transferred					
Graduated		High School Entered:			

## **Attendance:**

Grade	Year	Teacher	Days Absent	Times Tardy	Grade	Year	Teacher	Days Absent	Times Tardy

Father's Religion	
Mother's Religion	

Student Sacrament Received	Date	Parish	City, State
Baptism			
Reconciliation			
Eucharist			
Confirmation			

**YEARLY STUDENT INFO, EMERGENCY CONTACT, AND MEDICAL INFO**

**Family Information:**

Student Full Name:	
Student Birth Date:	
Best Family Email Address:	
Best Student Family Phone #(s):	

**In an Emergency and Parent cannot be reached:**

Contact #1 (Full Name, Relationship to Student, Phone #)	
Contact #2 (Full Name, Relationship to Student, Phone #)	

\_\_\_\_\_ I authorize the contacts above to assume responsibility for my children in the event of school emergency when I cannot be there.

\_\_\_\_\_ I authorize transportation for my child in case of an emergency.

\_\_\_\_\_ I authorize Trinity/Educare staff to procure surgical, medical, hospital, or dental care for my child in the event of illness or injury if I cannot be contacted to make arrangements for such treatment. It is understood by me that the expense of this service will be accepted by me.

\_\_\_\_\_ I do not authorize Trinity/Educare staff to oversee any medical treatment in my absence.

Physician: Name and Phone #	
All Immunizations Up To Date:	Y / N
Dentist: Name and Phone #	
Health Insurance: Company & Policy #:	

Please check any of the boxes below which describe a health problem your child has which might require attention at school. If your child has no such health problems, check "None of the above".

<input type="checkbox"/>	Blood disease (sickle cell anemia, aplastic anemia, malaria, hemophilia, etc.)	<input type="checkbox"/>	Hearing impairment requiring preferential seating or complete hearing loss
<input type="checkbox"/>	Heart problem requiring limitations	<input type="checkbox"/>	Digestive Disorder (ulcers, colitis)
<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Malignancy (leukemia, sarcoma, Hodgkin's disease, etc.)
<input type="checkbox"/>	Food allergy requiring immediate attention	<input type="checkbox"/>	Insect sting allergy – severe – requiring immediate attention
<input type="checkbox"/>	Orthopedic problem requiring limitations (brittle bone disease, rheumatoid arthritis)	<input type="checkbox"/>	Neurological problem (cerebral palsy, hydrocephalus, etc.)
<input type="checkbox"/>	Respiratory problem – severe – requiring limitations (asthma, cystic fibrosis)	<input type="checkbox"/>	Seizure disorder (epilepsy, etc.)
<input type="checkbox"/>	Urinary tract disorder (nephritis, absence of kid or bladder, etc.)	<input type="checkbox"/>	Vision impairment requiring preferential seating or complete vision loss
<input type="checkbox"/>	NONE OF THE ABOVE		

Additional Instructions (health, allergies, diet): \_\_\_\_\_

**If any boxes are marked please provide the office with professional medical care plan with detailed instructions.**

The following people are authorized to pick up my child/children from school if I am unable.

1. Name \_\_\_\_\_ relationship \_\_\_\_\_

2. Name \_\_\_\_\_ relationship \_\_\_\_\_

3. Name \_\_\_\_\_ relationship \_\_\_\_\_

**-OVER-**

**Religion Information:**

Family Registered Catholic at (circle): St. Anthony, St. Joseph, or other church (name) \_\_\_\_\_.

I am not Catholic, but am interested in being contacted by St. Anthony or St. Joseph's Parishes? (Circle) Y/N

**Marketing Permission:**

Please mark permission (X = Yes I give permission) to use my child's photo or voice

<input type="checkbox"/>	I give permission to use my child's picture or voice for media publications including, but not limited to billboards, commercials, brochures, and all social media relating ONLY to Trinity Catholic School purposes.
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**Communications preference:**

Please mark the preferred method of communicating important weekly school news	<input type="checkbox"/> EMAIL	<input type="checkbox"/> CHECKING WEBSITE
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## **New Student Immunization Record**

Complete and print the following document: LINK HERE:

[https://www.doh.wa.gov/Portals/1/Documents/Pubs/348-013\\_CertificateImmunizationStatusForm.pdf](https://www.doh.wa.gov/Portals/1/Documents/Pubs/348-013_CertificateImmunizationStatusForm.pdf)

## **FACTS LINK**

Complete the following application online: LINK HERE:

<https://online.factsmtg.com/signin/4CJDW>

## Volunteer Commitment

Family first and last name:	
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Volunteering is a long-standing tradition at Trinity Catholic School. Participation in the Volunteer Program allows all families to be involved in the life of the school. It also helps offset thousands of dollars that would otherwise come out of our budget. There will be many opportunities this year to offer either your time, talent, or financial support outside of your tuition. Below are some suggested volunteer needs of the school.

Volunteer coordinator	Volunteer data entry	Crossing guard	Tutor
Data entry	Snow removal / de-icing	Quarterly deep cleaning of school	Yearbook
Uniform store assistant	Landscape maintenance	Transportation of designated items	Classroom assistant
Classroom parent	Educare helper: training needed	Library assistant	Phone call reminders
Laminating teacher's items	Home and school activities (Halloween carnival, Bingo)	School cleaning	Carpenter work
Litter control	Daytime errands	Office mailings	Envelope stuffing

**Regardless of your tuition commitment, all families are required to complete 20 volunteer hours every year. It is our expectation that every family assist with the Auction and Pony Plop**

Throughout the year, email blasts will be sent via email with opportunities to help you fulfill your volunteer commitment. Further information will be discussed at your registration appointment. You may also refer to the volunteer portion of the school handbook.

**Our family will volunteer 20 hours during the school year and understand hours will be tracked. Failure to volunteer will result in a \$200 fee or \$10 per hour unfulfilled.**

New this year: Donating unused gift cards can count for hours other than auction, annual appeal, or Pony Plop. Gift card donations (\$10 = 1 hour). These will be used within the Trinity Community.

**Best email address:** \_\_\_\_\_

**Best Phone Number** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Uniform Agreement

Family Name:	
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Effective August 2018 | School Uniform Policy

School uniforms are included in the registration fee amount and are ordered ONLY through our school. They are designed and manufactured specifically by Elder Manufacturing for ALL Trinity Catholic School students. Our uniform package includes: pants, polo shirts, oxford shirts, cardigans, V-neck sweaters, skorts, jumpers, tights, and Trinity jackets. **NO other uniforms will be allowed.**

<p><b>GIRLS:</b> Only school-issued uniforms are allowed. School-issued uniform package: THREE pairs of pants, FOUR polo shirts, ONE long sleeve oxford, ONE short sleeve oxford, ONE skort (grades 6-8), ONE jumper (grades K-5), ONE cardigan, and TWO pairs of tights.</p> <p>Only Trinity sweatshirts or jackets will be allowed in the classrooms.</p>	<p><b>BOYS:</b> Only school-issued uniforms are allowed. School-issued uniform package: THREE pairs of pants, FOUR polo shirts, ONE long sleeve oxford, ONE short sleeve oxford, and ONE V-neck sweater.</p> <p>Only Trinity sweatshirts or jackets will be allowed in the classrooms.</p>
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### Clothing color clarifications:

- Pants are navy blue
- Polos are white or navy Blue.
- Long Sleeve oxfords are white
- Skorts and skirts are #92 plaid
- Cardigan sweaters are navy blue
- V-neck sweaters are navy blue
- School jackets are royal blue
- Tights are white
- Socks white or navy

**Consequences for uniform violation:**

- 1<sup>st</sup> Occurrence:** Phone call & letter explaining violation; Parent return signature required
- 2<sup>nd</sup> Occurrence:** Phone call & parent requested to pick up child or bring appropriate uniform to school
- 3<sup>rd</sup> Occurrence:** Meeting with administrator

### More details:

Hats are not to be worn in the building. Students may not wear sandals, flip flops or large clunky indoor boots or shoes. Only natural hair colors are allowed. No tattoos are allowed. Only piercings of the ears are allowed (no gauges). Trinity students who belong to Camp Fire, Scouts, or other similar youth groups may wear the group's uniform on meeting days. Modest, neat (free from holes) clothing may be worn on "free dress" days.

I will follow the above dress code.

Student 1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student 2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student 3 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student 4 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Attendance Policy

Regular attendance is required of all students to support the academic climate of the school. The interaction and personal relationships between students and teachers and between students and peers are aspects of education that cannot be made up once they are missed. Therefore, it is important to emphasize prompt class attendance and that only serious circumstances should be cause for absence. It is the student's responsibility to promptly make up all work missed due to absence. Please check Sycamore. Students are encouraged to contact their teachers using school email to access missed assigned work. Numerous absences may adversely affect a student's grade in a given class and the student's ability to participate in co-curricular activities. Excessive absences may also result in an automatic letter grade reduction. Family vacations should coincide with school holidays. Please consult the school calendar before making any/all medical appointments. Students will not be given early dismissal on these days. Not supporting Trinity's attendance policy places their student's standing at Trinity Catholic School in jeopardy.

### Excused Tardies /Absences

- If a child is late or absent from school, the parent/guardian is asked to phone the school (509-327-9369) prior to 8:45 A.M. on the day of the absence or late arrival. The parent must sign in the student at the office attendance desk if he/she is late for school. A parent/guardian may leave a message on the school's answering machine. Text messages will not be allowed to excuse your student. The validity of the reason given for the student's absence is left to the judgment of the administration.
- The school will generally not excuse for reasons relating to traffic, transportation problems, oversleeping, running late, or weather.
- A student's parent/guardian may excuse up to 5 tardies per semester for car trouble, traffic, weather, etc. Once a student has 5 tardies, a mandatory meeting with the parent, student and administration to discuss a plan for improvement will occur. Any additional tardies will be unexcused unless a student has a medical appointment and brings a note from his/her doctor upon coming to school. Academic consequences may also occur

### Vacations

- Parents and students especially need to understand that any choice to extend vacation times or take vacations during the school year, will bring about serious issues regarding attendance. Students and parents who choose to extend vacation periods could be jeopardizing the student's grade because of absenteeism and should seriously consider those choices ahead of time. Trinity Catholic School will not accept responsibility for providing special assignments and examinations for students not in attendance because of family vacations.

### Appointments/ Leaving Campus

- Parents/Guardians should avoid scheduling appointments during school hours. When such an appointment is made, the school office must be notified by phone or note **prior** to the student's appointment. For physician's appointments a student must bring a physician's note upon returning to school.

### Accumulated Absences

- A letter will be sent home after 5 absences per quarter (excused or unexcused) requesting a written explanation of absences and plan for improvement. There will also be a mandatory meeting with the parent/guardian, student, and administrator to discuss a plan for improvement. Special consideration will be given to medical-related absences; as always, all attendance scenarios will be reviewed on a case-by-case basis.

### Unexcused Tardies/Absences

- All students who arrive late to school must be signed in by their parent/guardian at the school office prior to being admitted to class.

### Athletic and Activity Rules and Attendance

- A student is ineligible for any game, practice or activity if he or she is absent from one or more class periods on a given day. Exceptions will be granted for appropriately pre-arranged situations e.g., medical appointments or funerals, with a call or note received prior to the day in question.

**I understand and will follow the above criteria. Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_**



## Financial Family Tuition

Payee Name   Students		
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Tuition: \$5100.00 per year per child in grades K-8

Registration Fee: \$225.00 per student per year plus \$150.00 per additional student **(Includes uniform)**

### Payment Options: Full price for one student

12 months 1 payment per month over 12 months	9 months 1 payment per month for 9 months	6 months 1 payment per month for 6 months	3 months 1 payment per month for 3 months
\$425.00	\$566.67	\$850.00	\$1700.00

### Option 1

I am able to pay the full tuition amount of \$5100.00 per year over \_\_\_\_\_ months.

### Option 2\*\*\*

After completing The FACTS (financial aid application), and meeting with the principal and finance team, I am able to pay \$ \_\_\_\_\_ over \_\_\_\_\_ months.

**\*\*\*Financial Aid Assistance provided by FACTS-financial aid application.**

**The administration is willing to work with each family on exceptions to this amount. During your registration appointment terms will be discussed. Every family needing financial aid is required to submit a FACTS (Tuition and Financial Aid Assessment) application.**

Failure to inform the principal of reasonable financial hardship, or falling 90 days behind in my tuition may result in removal from the school, and being sent to our collection agency.

### Payment Options:

Credit Card Option:

I agree to charge my credit card number (#) \_\_\_\_\_ csv code \_\_\_\_\_

expiration date: \_\_\_\_\_

Date of charge every month: \_\_\_\_\_

Check or Cash Option: I agree to pay the amount with cash or a check before the 5<sup>th</sup> of every month.

### Mandatory School Fundraising Events:

Each family, along with the tuition commitment, must participate in the four main school community events by:

1. Donating four items for the **Trinity School Auction or paying \$200.00**
2. Participating in the **Annual Appeal**
3. Selling six books of **Pony Plop** tickets
4. Sending the required letters for **Day in Motion or paying \$250.00**

Total registration fee amount paid:	\$ _____	Amount still owed:	\$ _____
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Payee Signature: \_\_\_\_\_ Date \_\_\_\_\_

## Final Review

1. I agree to read the school handbook.
2. I have met with the registration committee and completed the 9 forms in full; all boxes on page 1 are checked.

### Marketing Permission:

Please mark permission (X = Yes I give permission) to use my child's photo or voice.

<input type="checkbox"/>	I give permission to use my child's picture or voice for media publications including, but not limited to billboards, commercials, brochures, and all social media relating ONLY to Trinity Catholic School purposes.
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### Communications preference:

Please circle the preferred method of communicating important weekly school news	EMAIL	CHECKING WEBSITE
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\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Date