St. Rose of Lima Catholic School
Family Registration Form
2026-2027 School Year

Parent/Guardian Name/s: _____

Address: _____**City:** _____**Zip:** _____

E-Mail: _____**Phone:** _____

We wish to enroll our child/ren in St. Rose of Lima School for the 2026-2027 school year in the following grades:

STUDENT/S NAME	BIRTHDATE	GRADE 25-26

Pre-Kindergarten Program: Students must be 4 by August 1, 2026 to enroll in our Pre-Kindergarten program or 3 by August 1, 2026 to enroll in our Preschool. Please provide a copy of your child's birth certificate and immunization record **with this form** for registration to be complete.

Please select the option below that your child will use so that we can provide appropriate staffing.

Pre-Kindergarten- Monday-Friday 8:00am-11:00am □
Monday-Friday 8:00am-2:45pm □

Preschool- Monday, Wednesday, Fri 8:00am-11:00 □
Monday, Wednesday, Fri 8:00am-2:45pm □
Monday-Friday 8:00am-2:45pm □

Kindergarten: Students must be 5 by August 1, 2026 to enroll in our Kindergarten Program. Please provide a copy of your child's birth certificate and immunization record **with this form** for registration to be complete.

Please submit the following with this registration form:

_____ Birth Certificate
_____ Immunization Record
_____ Certificate of Baptism (if applicable)

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PAYMENT INFORMATION

Please check the choice that applies to your family:

_____ Parishioners at St. Rose Catholic Church

_____ Parishioners at _____ Catholic Church

_____ Non-Parishioners

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Please check the payment plan that you intend to use for the 26-27 school year for any balances:

_____ **Payment in full**: This single payment, due on or before July 1, 2026, may be made directly to the school. There is a 2.5% discount for utilizing this option. **Note: If payment is not received by the school on or before the due date, then payments must be made through FACTS.**

_____ **Payment through FACTS**: This option includes 12 monthly payments, beginning in July 2026, deducted automatically from the account of your choice on either the 5th or the 20th of the month. If you have been previously enrolled in FACTS, St. Rose will update your tuition and automatically begin your payment plan in July 2026. If you have not, you must set up your account with FACTS at www.factsmgt.com **no later than May 2026.**

UNLESS YOU ARE PAYING IN FULL, YOU MUST USE FACTS. PAYMENTS WILL NOT BE ACCEPTED EXCEPT THROUGH FACTS.

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I agree to make tuition payments for the 26-27 school year according to the option I have selected above. I have read the school Tuition Policy regarding payment and agree to abide by this policy.

_____ _____

Responsible Party's Signature Date

$100 non-refundable registration fee per family due with this form.

FOR OFFICE USE ONLY

$100 Family Registration Fee:
Cash Check #_____

Tuition:
In Full $_____ Check #____
Facts $_____
Account set up on_____