St. Mary on the Hill Catholic School
1220 Monte Sano Avenue
Augusta, GA 30904-4698

******ALL FEES ARE NONREFUNDABLE******

REGISTRATION FORM FOR RETURNING FAMILIES

St. Mary on the Hill Catholic Church is a Stewardship Parish. Catholic education is integral to the ministry of the Parish. The church is committed to paying the per pupil cost for stewardship families. Other fees are the responsibility of the parents. **The Registration/Insurance/Book fee of $300.00 per student must be paid before registration is complete and your child is placed on a class list. We need to hear from each family currently enrolled whether you are returning or not returning.** Please complete all information on this form and return it to the school office by January 18, 2008.

PLEASE PRINT

Father's Name _____ Mother's Name_____
(**Please indicate your correct title, i.e. Dr., Mr., Mrs., Ms., Sgt., Col., etc**.)

Address _____City_____ Zip _____ County _____

Subdivision or Neighborhood_____Home Phone_____ Work Phone_____

Cell/Pager_____ E-mail _____Religion _____ Parish_____

Our family will be returning to St. Mary on the Hill School for the 2008-2009 school year. Yes_____ No_____

If your answer is "no", please let us know why you are not returning. We are not returning to St. Mary on the Hill School because_____

Student resides with: (Circle) Both Parents Mother Father Other **Who is the Custodial Parent?**_____

STUDENTS YOU WISH TO ENROLL FOR 2008-2009
(Please list oldest to youngest)

FIRST NAME	**LAST NAME**	**Grade entering August 2008**

Do you have a child entering KINDERGARTEN (5 years old by 09/01/2008)? Yes_____ No _____

If **yes**, Child's name _____ Birth Date _____

Do you have a new student entering another grade? Yes _____ No _____

If **yes**, Child's name _____ Grade entering _____

If **yes**, you will receive a registration form for **NEW** students. When you receive this form, please fill it out and **return it to the school office no later than January 28, 2008.**

There are two options for registration and book fee payment. Option 1: full payment with registration form. Option 2: One-half total fee ($150 per student) due with registration; remaining balance paid by April 21, 2008. I fully understand if I have not paid these fees by the due date, my child(ren)'s names will be removed from the roster for the 2008-2009 school year.

Parent Signature _____ Date _____

For Office use only: Reg./Ins./Book Fee_____ New Reg. Forms sent _____