

# CEDAR VALLEY CATHOLIC SCHOOLS 2010-2011 REGISTRATION

\*If you have a NEW student or if you do not have Internet access, please contact the school office for a packet.

**Registration Due by March 5, 2010**

- 2010-2011 Online Registration– <https://www.myschoolsystems.com/cvce/registration/>
- Tuition Scholarship Packets (PSAS) - <https://www.mypsas.org>
  - o If you choose to fill out PSAS forms online, please remember to send in additional documentation required by PSAS.
- F.A.C.T.S. Form (only for families new to F.A.C.T.S.) - School Office
  - o F.A.C.T.S. Change of Status Form (for current families signed up with F.A.C.T.S. who need to make a change, i.e. address, phone, bank account, termination of agreement, etc.)
- Legal restrictions, decrees, stipulations, or pertinent court documents relating to child(ren) custody/custodial rights –
  - o Per Archdiocesan policy, these must be on file at the local school site.
- Miscellaneous School Forms (Athletic Physicals, Field Trips, Daycare, etc.)- School office
  - o Educational / Sacramental Information Sheet new students only
  - o Parish Verification Form (new students only)
- Non-Refundable Tuition Deposit - **\$50.00 per student Pre-8<sup>th</sup>, \$70.00 per student 9<sup>th</sup> - 12<sup>th</sup>**

Student Name(s) & Grade(s) 1) \_\_\_\_\_ 4) \_\_\_\_\_  
 2) \_\_\_\_\_ 5) \_\_\_\_\_  
 3) \_\_\_\_\_ 6) \_\_\_\_\_

**Insurance Waiver**

The school does not provide health or accident insurance for injuries incurred. If you are interested in obtaining insurance, please contact the school office for information concerning Healthy Kids in Iowa (HAWK-1). If you have adequate insurance, please sign this waiver.

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

**Parental Information Release**

At various times of the school year, your parish, school organizations, or homeroom parent may request the release of parents' names, addresses or phone numbers. Our family names, addresses, and phone numbers are not given out to any outside parish/school organizations.

CVCS may release my name, address, and phone number(s) to the CVCS Parishes, school organizations and/or homeroom parent.  
 \_\_\_ YES \_\_\_ NO

I wish to have our family information printed in the School Directory \_\_\_ YES \_\_\_ NO

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

**Consent for News Media**

My child (ren) DOES \_\_\_ DOES NOT \_\_\_ have my permission to have photographs or video/audio recordings of them taken by representatives of the news media or CVCS. This release is expressly intended to release and hold harmless Cedar Valley Catholic School's personnel from liability in case my child's photograph, image or voice is used by the news media.

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

**Tuition Responsibility**

I agree to adhere to all rules and regulations as set forth by Cedar Valley Catholic Schools. Furthermore, I agree to be financially responsible for all tuition and fees as set by Cedar Valley Catholic Schools for the above student(s). **(Both signatures are required if both parents/guardians are financially responsible)**

\_\_\_\_\_  
**Father/Guardian Signature**

\_\_\_\_\_  
**Mother/Guardian Signature**

**Office USE ONLY:** Date: \_\_\_\_\_ School: \_\_\_\_\_/\_\_\_\_\_ Initials: \_\_\_\_\_/\_\_\_\_\_

\*Check Amount \_\_\_\_\_ Check Number \_\_\_\_\_ \*Cash Amount \_\_\_\_\_