

St. Anthony Cathedral Basilica School

850 Forsythe

Beaumont TX, 77701

(409) 832-3486 FAX (409) 838-9051

Dear Parents/Guardians:

Thank you for your interest in St. Anthony Cathedral Basilica School. By choosing St. Anthony for your child/children, you are choosing a school that is blessed with a dedicated staff, wonderful children, and supportive families. The new school year promises to be one filled with active learning and a deepening of lived Gospel values.

Registration and fee statements are included in your packet. No enrollment application can be processed without a copy of the most recent income tax return form, and the current year's W-2 form/forms. St. Anthony is a wonderful place for children to build a superior academic foundation and to grow in faith, service, and community. Thank you for choosing St. Anthony Cathedral Basilica School.

Sincerely,

Mrs. Phyllis Walters

Principal

St. Anthony Cathedral Basilica School

St. Anthony Cathedral School
850 Forsythe St
Beaumont, Texas 77701
(409) 832-3486 FAX (409) 838-9051

January 19, 2012

Parents please find enclosed your **registration packets** for the 2012-2013 school year. Please do not send in your packets with your child(ren).

You will need to bring your 2011 W2, your most recent IRS Income Tax Form, and your packets to register your child(ren) on one of the following dates:

REGISTRATION IN CAFETERIA

Feb. 27, 2012	1:30 p.m. – 4:00 p.m.
Feb. 28, 2012	7:30 a.m. – 10:30 a.m.
Feb. 29, 2012	1:30p.m. - 4:30 p.m.
March 1, 2012	7:30a.m. - 10:30a.m.
March 5, 2012	7:30a.m. - 10:30a.m.
March 6, 2012	3:30p.m. - 6:30p.m.

**THE FOLLOWING FEES ARE DUE AT
REGISTRATION:**

* Family Registration Fee	\$100.00
* Curriculum/Book Fee	\$300.00 per child
* Facts Fee	\$ 41.00
* Home and School Fee	\$ 15.00
* Yearbook fee	\$ 35.00

All fees are non-refundable

**ST. ANTHONY CATHEDRAL SCHOOL
850 FORSYTHE
BEAUMONT, TEXAS**

**FEES FOR 2012-2013
(All fees are non-refundable)**

- | | |
|---|----------|
| * Registration fee per family
(due at time of registration) | \$100.00 |
| * Curriculum fee per child:
(due at time of registration so that textbooks,
materials, and supplies can be purchased
during the summer) | \$300.00 |
| * Fundraising Fee per family
(Families who wish to abstain from taking part in fundraising efforts may
pay a \$500.00 fundraising fee. This fee can be paid in full at registration or
can be added to tuition. Families who wish to sell tickets to support
fundraisers will receive them as in the past. Any amount turned in that is
less than the required \$500.00 will be applied to tuition.) | \$500.00 |
| * Facts Tuition Processing Fee
(Due at registration)
(If you are already enrolled in Facts, you will
automatically be re-enrolled.) | \$41.00 |
| * Home and school fee per family: | \$15.00 |
| * Yearbook Fee (if desired) | \$35.00 |
| * Aftercare
Daily fees for aftercare are:
1 child - \$7.00 per day
2 or more children - \$10.00 per day
Aftercare hours are 3:30pm. – 5:30pm.
A fee of \$10.00 every 15 minutes is charged per
student after 5:30pm.
Aftercare fees are sent out by the 15 th of each month following
the month of service. Payment is due by the 30 th . A \$10.00 late
fee will be incurred for each month the payment is late. | |

All tuition payments are made through FACTS on a 10 month schedule.
(July – April)

No monthly payments are accepted at the school.

If payments are not up-to-date, students may not be allowed to attend
classes.

The actual tuition cost for one student at St. Anthony is \$5,800. Tuition assistance is offered to all families with the income-based tuition schedule seen below. We are able to offer this assistance through our subsidies, grants, and fundraisers. Please continue to support these efforts.

St. Anthony Cathedral School 2012-2013 Tuition

Category 1 Catholic – in parish	less than \$49,999	Full Cost Tuition	Discounted Tuition	Paid in full
1 child		\$ 5,800.00	\$4,500.00	\$4,365.00
2 children		\$11,600.00	\$6,500.00	\$6,305.00
3 children or more		\$17,400.00	\$8,000.00	\$7,760.00
Category 2 Catholic – out of parish				
1 child		\$ 5,800.00	\$4,700.00	\$4,559.00
2 children		\$11,600.00	\$7,000.00	\$6,790.00
3 children or more		\$17,400.00	\$8,500.00	\$8,245.00
Category 3 – Catholic – in parish \$50,000.00 - \$74,999.00				
1 child		\$ 5,800.00	\$4768.00	\$4625.00
2 children		\$11,600.00	\$7345.00	\$7125.00
3 children or more		\$17,400.00	\$8711.00	\$8450.00
Category 4 Catholic – out of parish				
1 child		\$ 5,800.00	\$4979.00	\$4830.00
2 children		\$11,600.00	\$7643.00	\$7414.00
3 children or more		\$17,400.00	\$9051.00	\$8779.00
Category 5 Catholic – in parish 75,000.00 - \$99,999.00				
1 child		\$ 5,800.00	\$5025.00	\$4874.00
2 children		\$11,600.00	\$7860.00	\$7624.00
3 children or more		\$17,400.00	\$9329.00	\$9049.00
Category 6 Catholic - out of parish				
1 child		\$ 5,800.00	\$5237.00	\$5080.00
2 children		\$11,600.00	\$8158.00	\$7913.00
3 children or more		\$17,400.00	\$9670.00	\$9380.00
Category 7 - Catholic - in parish \$100,000.00-\$124,999.00				
1 child		\$ 5,800.00	\$5283.00	\$5125.00
2 children		\$11,600.00	\$8066.00	\$7824.00
3 children or more		\$17,400.00	\$9483.00	\$9199.00
Category 8 Catholic - out of parish				
1 child		\$ 5,800.00	\$5494.00	\$5329.00
2 children		\$11,600.00	\$8364.00	\$8113.00
3 children or more		\$17,400.00	\$9824.00	\$9529.00
Category 9 - Catholic - in parish \$125,000.00 and above				
1 child		\$ 5,800.00	\$5540.00	\$5374.00
2 children		\$11,600.00	\$8272.00	\$8024.00
3 children or more		\$17,400.00	\$9638.00	\$9349.00
Category 10 Catholic - out of parish				
1 child		\$ 5,800.00	\$5752.00	\$5579.00
2 children		\$11,600.00	\$8569.00	\$8312.00
3 children or more		\$17,400.00	\$10,185.00	\$9879.00
Category 11 - Non Catholic				
1 child		\$ 5,800.00	\$5800.00	\$5626.00
2 children		\$11,600.00	\$10,300.00	\$9,991.00
3 children or more		\$17,400.00	\$11,700.00	\$11,349.00

**St. Anthony Cathedral Basilica School
850 Forsythe
Beaumont, Texas 77701**

Records Needed:

Academic Records

Immunization record (current and up-to-date)

Known Allergies

Health Insurance Card

Birth Certificate

Baptism Certificate (if Catholic)

Court Records (if necessary)

**Please help us keep these files current.
If address or phone numbers change,
please notify the office immediately.
(409)832-3486 ext. 110**

TERMS OF CONDITIONAL ACCEPTANCE

**ST. ANTHONY CATHEDRAL BASILICA SCHOOL
850 FORSYTHE STREET
BEAUMONT TX 77701**

The Administration of **St. Anthony Cathedral Basilica School** agrees to accept:

Student's name

As a full-time student at St. Anthony Cathedral Basilica School for a period of **Nine (9) Weeks**.

This conditional acceptance is granted to determine the student's ability to meet the expectations of the school program. The student must maintain passing grades and acceptable behavior as outlined in the current **St. Anthony Cathedral Basilica School Student Parent Handbook**.

The Administration of **St. Anthony Cathedral Basilica School** will determine the status of continued enrollment at the end of the designated time. I/We read and understand the terms of the above. I/We do accept these terms and choose to enroll our son/daughter at St. Anthony Cathedral Basilica School under the above terms.

I/We are fully aware that there is no guarantee of re-enrollment if these terms are not satisfactorily met.

Administrator: _____

Parent/Guardian: _____

Date: _____

St. Anthony Cathedral Basilica School
850 Forsythe St.
Beaumont, Texas 77701
Established in 1895

Parent name _____

Student/sName _____

The undersigned hereby accepts the enrollment of our child(ren) in St. Anthony Cathedral School for the entire year from August through May. In connection with the foregoing we understand and agree:

- That our child(ren) will be enrolled in religious classes, as well as academic classes, and that he/she will attend liturgies, and prayer services scheduled during the school day.
- That tuition is paid in accordance with the FACTS Tuition Management Services payment method and due dates or may be paid in full at the onset of the school year.
- That, where medical reasons or a change of residence dictate a premature withdrawal, the school may, in its absolute discretion, waive payment of the unpaid balance; that under no circumstances will fees be refunded.
- That in the event medical attention is required, the school will use its best efforts to follow steps indicated on the student emergency card.
- That we will support all fundraising efforts of the school.

That the school shall have the right to require the withdrawal of our child(ren) if tuition is not paid on time.

- That the school shall have the right, in its discretion, to require the withdrawal of our child(dren) if the school standards and requirements of conduct, behavior, and academic achievement are not met.

Parent or Guardian Signature

Date

St. Anthony Cathedral Basilica School

850 Forsythe
Beaumont, TX 77701
2012-2013

Photo/Video Release

PLEASE READ THE FOLLOWING AND GIVE APPROPRIATE SIGNATURES WHERE NEEDED.

STUDENTS(S) NAME AND GRADE(S)

(1) PHOTO/VIDEO RELEASE

I hereby give permission for my son/daughter to be photographed or videotaped at St. Anthony Cathedral Basilica School. I realize that the photo may be published in the newspaper, a magazine, Ed-line or other publication. The video may be used for educational or informational purposes regarding the programs or curriculum at St. Anthony Cathedral Basilica School.

_____ **Yes** _____ **No**

Parent Signature

Date

ST. ANTHONY CATHEDRAL BASILICA SCHOOL
850 FORSYTHE
BEAUMONT TX 77701
(409) 832-3486 FAX (409) 838-9051

PARISH ACCREDITATION

Student's
Name_____

Address_____

Phone_____ Entering grade_____

Parent or Guardians responsible for tuition_____

Parish of parent of guardian of students_____

Are you a certified member of that parish? (You are listed in the church registry).

Yes_____ No_____

Signature of parents or guardians_____

Date_____

Dear Parents of Catholic Students:

This form will be forwarded to your pastor for certification. Your pastor will return certification information to us.

You will be notified if there is some reason your student cannot be certified.

Sincerely,

Phyllis Walters
Principal

St. Anthony Cathedral Basilica School

850 Forsythe
Beaumont, TX 77701
2012-2013

SCHOOL DIRECTORY RELEASE

PLEASE READ THE FOLLOWING AND GIVE APPROPRIATE SIGNATURES WHERE NEEDED.

STUDENTS(S) NAME AND GRADE(S)

(2) SCHOOL PHONE DIRECTORY

Would you like your phone number to be published in the directory?

_____ Yes _____ No

Parent Signature

Date

St. Anthony Cathedral Basilica School
850 Forsythe
Beaumont, Texas 77701
RELEASE OF INFORMATION

Date:_____

Name of former school:_____

Address:_____

City, State, Zip code:_____

I hereby authorize the above school to release my child's record to St. Anthony Cathedral School.

Parent Signature

Date

Dear Administrator:

Please send cumulative records for the following student who has enrolled at St. Anthony Cathedral School:

ACADEMIC
AWARDS/RECOGNITIONS
BIRTH CERTIFICATE
HEALTH
SPECIAL REPORTS/TESTING
BAPTISMAL

Name of Student_____

Date of Birth_____

Thank you,

Gretchen LaFleur
Secretary
Phone: (409) 832-3486 ext. 110
Fax: (409) 838-9051

Review carefully, complete blanks or make corrections and return.

**St. Anthony Cathedral Basilica School Registration Form
2012 - 2013**

Student Information:

Student Name: _____ **Grade 2012-2013:** _____
Last First M. (Preferred Name)

Address: _____ **Home Phone:** _____
Address City State Zip

Gender: _____ **Birth Date:** _____ **Place of Birth:** _____

Religion: _____ **Parish/Church:** _____

Church where Baptized: _____ **Baptism Date:** _____

Student Ethnicity: _____ **Previous School:** _____

Names and ages of other siblings not attending St. Anthony Cathedral School:

Parent/Guardian Formal Name: _____

Mailing Address: _____ **Home Phone:** _____
Address City State Zip

Father's Name: _____ **Religion:** _____
Address: _____ **Home Phone:** _____
Employer: _____ **Occupation:** _____
Bus. Phone: _____ **Cell Phone:** _____
Father's E-mail: _____

Mother's Name: _____ **Religion:** _____
Address: _____ **Home Phone:** _____
Employer: _____ **Occupation:** _____
Bus. Phone: _____ **Cell Phone:** _____
Mother's E-mail: _____

If applicable, 2nd Parent (Not living at above address): _____

2nd Parent Address (for mailings): _____
Address City State Zip

2nd Parent Preferred Phone: _____ **2nd Parent Cell Phone:** _____
2nd Parent Bus. Phone: _____ **2nd Parent E-mail:** _____

Specialized Skills: _____

Does your child have any special academic requirements? Yes _____ No _____
(Please provide documentation)

Do you have computer access for Edline* purposes? Yes _____ No _____

***Edline is an on-line service through which parents and students access grades, assignments, newsletters, etc.**

Turn over to complete form

Grandparents Information (Mother):

Name: _____

Address: _____
Address City State Zip

Phone: _____ E-Mail: _____

Grandparents Information (Father):

Name: _____

Address: _____
Address City State Zip

Phone: _____ E-Mail: _____

Grandparents Information (Other):

Name: _____

Address: _____
Address City State Zip

Phone: _____ E-Mail: _____

Contact Persons: For emergencies and after school pickup.

Children will not be released to people not on this list without specific permission from parents.

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

3. Name: _____ Phone: _____

4. Name: _____ Phone: _____

To any physician, hospital or authorized healthcare provider regarding emergency health/medical services.

This is to verify that in the event of my unavailability, a staff member of the Diocese of Beaumont, one of it's parishes, or schools, or an adult advisor is authorized to order emergency medical care for my child named above and is also authorized to execute any permission forms or other authorization required in connection with such care.

Child's Physician: _____ Phone Dr. Office: _____

Preferred Hospital: _____

Insurance Company: _____ Insurance Phone: _____

Policy Carrier: _____ Policy Number: _____

Known Allergies: _____

Prescription drugs currently being taken: _____

Parent/Guardian's Signature

Date

A photocopy of both sides of major medical insurance ID card must be attached.