

## Greek School Registration Form

1. Registration Form for Students of Pre-Kindergarten through Regents Level
2. Classes meet promptly on Tuesday and Fridays, from 5:00 p.m. until 6:30 p.m.
3. Remember: Your "Stewardship" must be current for 2018 in order to register your child.

Student's Name: English: \_\_\_\_\_ Grade \_\_\_\_\_

Greek: \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_

Second Student's Name: English: \_\_\_\_\_ Grade \_\_\_\_\_

Greek: \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_

Third Student's Name: English: \_\_\_\_\_ Grade \_\_\_\_\_

Greek: \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_

Home Address: \_\_\_\_\_

House number, Street, City, State, Zip Code

Phone: Home: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Business: Mother: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_

Business: Father: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

Parent's Names: \_\_\_\_\_

I wish to serve as a classroom volunteer.

Church Membership Number: \_\_\_\_\_

Registration Fee: (Amount) \_\_\_\_\_ for \_\_\_\_\_ students. Registration paid on: \_\_\_\_\_

(X) by \_\_\_ check number \_\_\_\_\_ Amount on check \_\_\_\_\_

(X) by \_\_\_ cash Amount paid: \_\_\_\_\_

(x) by \_\_\_ credit card Amount paid: \_\_\_\_\_

**Holy Trinity Greek Afternoon School**  
**10 Mill Road, New Rochelle, NY 10804**

Dear Holy Trinity,

\_\_\_\_\_ (date)

We have enrolled our child/children in the Greek Afternoon School Program for the School Year 2018 to 2019.

We are paying our Registration today. We will be paying our Tuition as follows:

\_\_\_ Registration only \$ \_\_\_\_\_

\_\_\_ Full Payment at Registration \$ \_\_\_\_\_

\_\_\_ Half payment at Registration Time \$ \_\_\_\_\_  
 or by September 14<sup>th</sup>

\_\_\_ Balance Half Payment by January 15<sup>th</sup> \$ \_\_\_\_\_

1. **No refunds will be made** after the first two (2) weeks of Greek School. \_\_\_\_\_ (Parent's Initials)
2. **A student will not** receive a Certificate of Promotion or Graduation Diploma, if tuition is not paid in full by May 31<sup>st</sup>. \_\_\_\_\_ (Parent's Initials)

**GREEK SCHOOL REGISTRATION INFO**

Registration begins on May 29<sup>th</sup> and must be completed by June 29<sup>th</sup>.

Penalty of \$100 per child will be added if registration takes place after the above dates.

**First Day of Classes; Tuesday, September 18<sup>th</sup>, 2018**

Classes meet on Tuesdays and Fridays from 5:00 p.m. to 6:30 p.m.

Registration fees are \$65 per child for members and \$80 per child for non-members. Tuition for the school year 2018-2019 is as follows:

	<b><u>Parish Members:</u></b>	<b><u>Non Members:</u></b>
<b>First child:</b>	<b>\$640</b>	<b>\$920</b>
<b>Each additional child:</b>	<b>\$490</b>	<b>\$520</b>

**Please Note:** 50% Greek School tuition must be paid by September 14<sup>th</sup> and the balance by January 15<sup>th</sup>.

I give my permission to charge both of these payments, on their due dates. \_\_\_\_\_ (Parents' Initials)

Credit Card \_\_\_\_\_ Exp. date \_\_\_\_\_