

NEW FAMILY  
 RETURNING FAMILY



# ST. MEL'S CATHOLIC ACADEMY

154-24 26<sup>th</sup> Avenue ○ Flushing, NY 11354  
 Phone: (718)539-8211 ○ Fax: (718)539-6563 ○ [www.stmelsacademy.org](http://www.stmelsacademy.org)

## REGISTRATION CONTRACT 2021-2022 SCHOOL YEAR

Please submit this form to the main office to register your child for the 2021-2022 school year. This form and payment of the educational fee secures your child's spot at St. Mel's Catholic Academy for the 2021-2022 academic year. All students must be in compliance with NYC Immunization Schedule. Depending on the grade, additional paperwork may be required, including an updated physical and immunization form.

\*Please note that this form will not be accepted if tuition is owed from the 2019-2020 school year.  
 \*Financial Assistance may be available for those who qualify at [www.futuresineducation.org](http://www.futuresineducation.org)

Family Last Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Cell Phone #: \_\_\_\_\_ Parent/Guardian Cell Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Child's Name	Grade 2019-2020 Year	Fee Per Child (Non-refundable)
		\$250.00
		\$250.00
		\$250.00
		\$250.00
TOTAL		\$ _____ .00

\_\_\_\_ Our family is registered Catholic. Parish \_\_\_\_\_ Envelope number \_\_\_\_\_  
 \_\_\_\_ Non- Catholic

By signing below, I acknowledge that I have read and fully understand the non-refundable fees, tuition costs, and school fees and terms outlined in this contract. I further understand that I am legally responsible for the payment of all tuition and fees.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

**\$150 Registration Fee Paid** – Cash or Check # \_\_\_\_\_  
 For NEW students only

Received on Date: \_\_\_\_\_

**Education Fee Paid** – Cash or Check # \_\_\_\_\_  
 For all NEW & RETURNING students

Received on Date: \_\_\_\_\_

**Immunization/Updated Medical Record Submitted & Attached**

Received on Date: \_\_\_\_\_

- \*Nursery – updated physical
- \*PreK – updated physical
- \*Kindergarten – updated physical as well as 2<sup>nd</sup> MMR and 2<sup>nd</sup> Varicella
- \*5<sup>th</sup> Grade going into 6<sup>th</sup> Grade – Tdap Booster immunization
- \*6<sup>th</sup> Grade going into 7<sup>th</sup> Grade – Meningococcal immunization

\*All children ages 6 months through 59 months enrolled in Nursery, PreK or Kindergarten must receive one dose of the influenza vaccine between July 1<sup>st</sup> and December 31<sup>st</sup> of each year. Please provide proof of this by the first day of school – September 2021.