



St. Therese  
**LITTLE FLOWER CATHOLIC SCHOOL**

*Cultivating Leaders With Servant Hearts*

Little Flower Catholic School, an educational ministry of Little Flower Parish, exists to provide quality Catholic education for the Eastside and beyond as it has since 1926. Little Flower is a compassionate, caring community for pre-kindergarten through eighth grade that celebrates the growth of each person. We welcome all families who share our philosophy and mission.

Our school provides a safe, nurturing environment, a challenging academic curriculum, with an emphasis on the arts, that prepares students for higher educations and helps them develop into confident, responsible citizens. Following the words of St. Therese, our patroness, "Love is repaid by love alone," we promote a dedication to the Catholic values of peace, justice, and service.

**Section I: Student(s) Enrolling**

<b>Student's Name</b> (First, Middle, & Last)	<b>DOB</b> (MM,DD,YYYY)	<b>Catholic</b> Y/N	<b>Gender</b> M/F	<b>Ethnicity</b> See Below	<b>Race</b> See Below	<b>Grade</b> Entering
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____

Ethnicity = (Hispanic or Latino = YES) or (Not-Hispanic or Latino = NO)

Race = 1. American Indian/Native Alaskan 2. Asian 3. Black 4. Native Hawaiian/Pacific Islander 5. White 6. Two or more races

**\*\*Pre-School– Pre-3's \_\_\_\_\_ or Pre-4's \_\_\_\_\_ Please circle days and times attending:**

<b>Monday</b> a.m. / p.m.	<b>Tuesday</b> a.m. / p.m.	<b>Wednesday</b> a.m. / p.m.	<b>Thursday</b> a.m. / p.m.	<b>Friday</b> a.m. / p.m.
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By registering my child(ren) I agree to comply with ALL rules and policies in the Little Flower Handbook as enforced by the school administration.

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

*Section II: Parent Information*

**Mother's Information**

**Custodial Parent: Y / N**

Name: \_\_\_\_\_

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

City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Cell #: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Email: \_\_\_\_\_

**Father's Information**

**Custodial Parent: Y / N**

Name: \_\_\_\_\_

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

City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Cell #: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Email: \_\_\_\_\_

*Section III: Other Contact Information*

1. Name: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

Cell #: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

Cell #: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

*Section IV: Student Information*

**Please list student and any allergies and/or health problems:**

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**Please list any medications that your child/ren takes regularly:**

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*Section V: New Student Information*

**Please list former school so we may obtain records:**

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**\$50.00 per student - registration fee is required at the time of enrollment**

**INFORMATION FOR BUSINESS OFFICE**  
**All information must be provided, even if it is unchanged or**  
**already provided in another area of this form.**

Party responsible for payment: \_\_\_\_\_

Relationship to students: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Home #: \_\_\_\_\_

Cell #: \_\_\_\_\_ E-Mail : \_\_\_\_\_

Student's Name (First and Last)	Grade (next year)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**\*\*Pre-School -- Please circle days and times attending**

<b>Monday</b> am / pm	<b>Tuesday</b> am / pm	<b>Wednesday</b> am / pm	<b>Thursday</b> am / pm	<b>Friday</b> am / pm
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**\*\*Attending:**    \_\_\_\_\_ **Pre-School 3's**    \_\_\_\_\_ **Pre-School 4's**

For the \_\_\_\_\_ school year, I will pay my student's tuition by the payment option below.

- Option 1    \_\_\_\_\_    Full Tuition due August 15<sup>th</sup>. This option entitles responsible party to a \$50 discount. This payment is to be made directly to Little Flower. A discount will not be given if payment is not received by due date.
- Option 2    \_\_\_\_\_    Two Payment Option. Half of full tuition due to Little Flower by August 15<sup>th</sup> ; the other half is due by January 15th.
- Option 3    \_\_\_\_\_    Monthly Payments through FACTS. This entitles the responsible party to budget payments over 10 months through FACTS Tuition Management beginning in August. If not previously enrolled with FACTS, I will complete a FACTS Tuition Agreement Form, by going to:  
<https://online.factsmgt.com/signin/3GM44>  
and following the prompts to set up a new payment plan.

I agree to make tuition payments for the \_\_\_\_\_ school year according to one of the options above.

Responsible Party's Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Please send me financial aid information as soon as it becomes available

\_\_\_\_\_ I will be applying for a State Educational Choice Voucher

**LITTLE FLOWER SCHOOL  
CATHOLIC DISCOUNT QUALIFYING FORM  
(K – 8 only)**

<b>Student Name</b> _____	<b>Registering for Grade</b> _____
_____	_____
_____	_____
_____	_____

To qualify for a Catholic discount, several criteria must be met. Please complete this form if you feel you meet all of the criteria.

1. You must be a registered parishioner at Little Flower (if you are a participating member at another parish, we will provide a verification form for your pastor to sign).

\_\_\_\_\_ We are registered as parishioners at Little Flower Parish.

2. You must have a current stewardship card on file at the parish office.

\_\_\_\_\_ We have returned our completed stewardship card.

3. You must make a commitment of time, talent, and treasure to the parish on your stewardship card and keep that commitment to the best of your ability. There is no minimum financial amount that is required, but some giving of treasure in addition to volunteer time is expected.

\_\_\_\_\_ We support Little Flower Parish through stewardship of treasure. Our envelope number is \_\_\_\_\_.

\_\_\_\_\_ We support Little Flower Parish through stewardship of time and talent. During this past year our family has volunteered in the following areas:

**Activity**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. You AND your student(s) MUST attend Mass each weekend. We feel strongly that the Liturgy is central to our Catholic faith and our parish life. Although we cannot monitor Mass attendance, we will verify attendance through our record of contribution envelopes received (envelopes must be placed in collection each week). If you have automatic contributions, or if you cannot make any financial contribution on a given week, you are required to place your empty envelope in the collection.

\_\_\_\_\_ We attend Mass each week. Our usual Mass time is (circle one).

Sat. 5:00 p.m.      Sun 9:30 a.m.      Sun 6:00 p.m.