Dear St. Michael the Archangel School Families,

Thank you for choosing St. Michael the Archangel School for your child’s education. Our goal is to provide a quality educational experience to all of our students in a nurturing, Catholic-based environment. It is time to begin the planning process for the 2020-21 school year and your child’s academic needs. We ask that you complete the attached forms to reserve a space in the next grade level for your child. **Please note, transportation and textbook forms have also been included in this packet.**

This year, we ask that you make your commitment **November 20th thru November 26th for a $50 discount off the re-registration fee.**

- **November 20th thru November 26th** -- The re-registration fee will be $100 per student (this represents a discount of $50). **There will be a drawing for all students registered by Thanksgiving break! One lucky student will be chosen, from those registered, to receive a $500 credit towards their 2020-21 tuition.**

- **December 3, 2019 through January 31, 2020** -- The re-registration fee will be $125 per student (this represents a discount of $25).

- **February 3, 2020 through May 22, 2020 and for all new registrants--the re-registration fee will be $150.00 per student. Any re-registrations after Memorial Day break will be $175!**

Kindly fill out the attached **FORMS** and return them to the Advancement Office, c/o Marianne Gano. **ALL RE-REGISTRATION FEES WILL BE BILLED THROUGH FACTS INCIDENTAL BILLING. NO MONEY NEEDS TO ACCOMPANY YOUR RE-REGISTRATION FORM. RE-REGISTRATION FEES ARE NON-REFUNDABLE.**

If you have any questions regarding registration, please contact Mrs. Marianne Gano, Director of Advancement, at 610-867-8422 ext. 17.

Thank you again for choosing St. Michael the Archangel School, and we look forward to another successful academic year with your child! God bless you and your families.

Sincerely,

Mrs. Colleen Weiss  
Principal

Monsignor Nevin Klinger  
Pastor – ABVM

Father Thomas Buckley  
Pastor – St. Joseph

**Nurturing Students. Challenging Minds. Inspiring Faith-Filled Leaders.**

**Elementary School Campus:** 5040 St. Joseph’s Road, Coopersburg, PA 18036  610.965.4441  
**Middle School Campus:** 4121 Old Bethlehem Pike, Bethlehem, PA 18015  610-867-8422  
www.st-mikes.com
ST. MICHAEL THE ARCHANGEL SCHOOL
2020-21 RE-REGISTRATION FORM

Student Name ____________________________________________ Current Grade ________
Student Address ____________________________________________
Parent Email Address ____________________________________________
Grade Next School Year: ____________________________________________

Please check the appropriate response concerning registration:

_____ My/Our child WILL attend St. Michael the Archangel School next year

_____ I/We are re-registering prior to THANKSGIVING BREAK and wish to have a $50 discount applied to the re-registration fee. $100.00 per child will be charged to your FACTS account.

_____ I/We are re-registering PRIOR to January 31, 2020 and wish to have a $25.00 discount applied to the re-registration fee. $125.00 per child will be charged to your FACTS account.

_____ I/We are re-registering AFTER February 3, 2020. $150.00 per child will be charged to your FACTS account.

As a reminder any re-registrations after Memorial Day will be charged $175 and may be asked to pay by check or CASH.

The following information relating to the above child can be used to assist in completing the required Pennsylvania Department of Education – NCEA report:

_____ Asian  _____ Black  _____ Native HI PAC ISL
_____ White/Caucasian  _____ Hispanic  _____ Two/More Races
_____ Unknown Race
_____ We do not wish to supply this information

I/We understand that by completing these forms, St. Michael the Archangel will reserve space in the designated grade for the aforementioned student. I/We fully understand that the school administration will rely upon this commitment to determine the number of available seats in each grade level. I/We agree to the conditions set forth by the tuition payment plan and the guidelines for receipt of any scholarship / financial assistance plans. I/We also understand that the registration fee is NON-REFUNDABLE.

_________________________________________  __________________________
Signature of Parent/Legal Guardian  Date