



Dear Prospective Parents,

Thank you for your interest in St. John Fisher Parish School. Enclosed you will find information about our school and programs, as well as an application packet for Transitional Kindergarten and Kindergarten.

St. John Fisher Parish School promotes academic excellence in a faith-based environment for students in Transitional Kindergarten through eighth grade. We recognize each student in our care as a unique child of God, and we are committed to supporting our students in their academic, spiritual, and social-emotional development. Our esteemed faculty and staff are honored to partner with parents in shepherding students along their journeys to Believe, Learn, and Care.

I encourage you to schedule a campus tour so you may witness our school community in action. I look forward to meeting you.

Sincerely,

A handwritten signature in black ink that reads 'Mrs. Colleen M. Guenther'.

Mrs. Colleen M. Guenther  
Principal



## AGE GUIDELINES

### TRANSITIONAL KINDERGARTEN (TK)

- Per the California Department of Education, students applying for TK must turn four years old by September 1 of the academic year for which they are applying.
- Transitional Kindergarten is designed to be the first year of a two-year kindergarten program with an emphasis on social-emotional development and academic readiness.

### KINDERGARTEN

- Per the California Department of Education, students applying for Kindergarten must turn five years old by September 1 of the academic year for which they are applying.
- Kindergarten curriculum is driven by the California Content Standards with an emphasis on developing foundational skills in preparation for first grade.



## APPLICATION PROCEDURE

1. Obtain an application packet from the school office or website.
2. Return the complete packet to the school office, including:
  - \$100 non-refundable application fee
  - Birth certificate
  - Baptismal certificate
  - Immunization record
  - School entry form completed by doctor
  - Preschool recommendation form
  - Parent questionnaire
  - Application form
3. Schedule student screening/testing for admission.
4. School office will email admissions decision.

# New Family Application for Admission 2026-2027



## St. John Fisher School

5446 Crest Road  
 Rancho Palos Verdes, CA 90275  
 (310) 377-2800

*Please return the completed form (one per child)  
 to the **School Office** along with the \$100 application fee.*

# Family Photograph

*Please clip here*

Student Last Name	Student First/Middle Name	M/F	Grade Entering
Birthdate	Birthplace		
Home Telephone	Home Address		
Baptism Date	Church Name & Address		
First Communion Date	Church Name & Address		
Current School	School Address	School Phone #	
Catholic?	SJF Parishioner?	Referred by SJF Family?	Referring Family
Yes No	Yes No	Yes No	

**Ethnic Origin Needed for Census:**

(check all that apply)

- American Indian or Alaska Native
- Asian

- Black or African American
- Filipino
- Hispanic / Latino
- Middle Eastern or North African

- Multi-racial
- Native Hawaiian/Other Pacific Islander
- White

<b>Father's First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
<b>Birthplace</b>	<b>Religion</b>	<b>Occupation</b>
<b>Marital Status</b>	<b>Home Address</b>	<b>Email Address</b>
<b>Home Telephone</b>	<b>Cell Phone</b>	<b>Work Telephone</b>
<b>Mother's First Name</b>	<b>Maiden Name</b>	<b>Last Name</b>
<b>Birthplace</b>	<b>Religion</b>	<b>Occupation</b>
<b>Marital Status</b>	<b>Home Address</b>	<b>Email Address</b>
<b>Home Telephone</b>	<b>Cell Phone</b>	<b>Work Telephone</b>

*Please indicate why you want your child to attend St. John Fisher School and your current school/parish involvement:*

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<b>Parent Signature:</b> _____ <b>Date:</b> _____
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## SCHOOL RECOMMENDATION FORM: TK - KINDERGARTEN

NAME OF APPLICANT: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

This child is seeking admission to St. John Fisher School. We appreciate your observations and candid feedback. All recommendations are kept strictly confidential. Please submit this form to the parents in a sealed envelope or email a scan or photo of the form to [schooloffice@sjf.org](mailto:schooloffice@sjf.org). Thank you.

The parents of this child gave permission for us to receive your recommendation.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Preschool / Nursery School:	
Evaluator:	Position:
Signature:	Date:
How long have you known this student?	
How long has the student been enrolled in your program?	

### **Emotional Development**

Has this child had any repeated problems for an extended period of time?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, please explain:				
Can this child sit still for a short period of time to listen to a story or do a simple task?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
How well does this child react when plans change?	<input type="checkbox"/> Becomes upset	<input type="checkbox"/> Cries easily	<input type="checkbox"/> Accepts change	
Does the child tire easily? Seem overly restless/fidgety?	<input type="checkbox"/> Yes	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Selcom	<input type="checkbox"/> No
Does the child accept consequences without tantrums?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Is the child easily distracted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Does the child cling to a parent, guardian, or teacher?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

### **Self Help Skills**

Can this child dress him/herself (e.g. buttons, zippers, snaps, laces) ?	<input type="checkbox"/> Yes	<input type="checkbox"/> With some help	<input type="checkbox"/> Mostly needs help	
Can the child take care of his own belongings (e.g., lunchbox, backpack, sweatshirt) ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Can the child take care of his/her own bathroom needs?	<input type="checkbox"/> Yes	<input type="checkbox"/> Mostly	<input type="checkbox"/> Needs help	<input type="checkbox"/> No

**Social Skills and Behaviors**

Is the child able to easily share items?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the child use good manners?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the child play and work cooperatively with others?	<input type="checkbox"/> Mostly	<input type="checkbox"/> Sometimes <input type="checkbox"/> Has difficulty
Does the child wait his or her turn to speak in a group?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**School Skills**

Does the child obey classroom, school, and playground rules?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can the child follow a:		
Single direction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Two-step direction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Three-step direction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the child know his/her first and last name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What level of interest does the child show in learning?	<input type="checkbox"/> High	<input type="checkbox"/> Average <input type="checkbox"/> Low
Can this child work independently?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the child use materials (e.g., pencils, glue, scissors) appropriately?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the child know the name of four or more colors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What numbers does the child recognize?		
What uppercase letters does the child recognize?		
What lowercase letters does the child recognize?		
Does the child seem academically ready for kindergarten?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the child seem emotionally ready for kindergarten?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please use this space to provide further information you feel is pertinent in considering this child for kindergarten.

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**PARENT QUESTIONNAIRE: TK - KINDERGARTEN**

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Parent completing this form: \_\_\_\_\_

**Family Background**

Please tell us about your family situation (siblings, step/parents, grandparents). If your child has siblings, please include their ages.

What language(s) is spoken in your home?

**School and Church Experience**

Has your child attended preschool? YES NO

If yes, how long? \_\_\_\_\_

Which school(s)? \_\_\_\_\_ -

Does your child attend church with you? YES NO

Is your child able to sit still and listen to a story for 5 – 10 minutes? YES NO

Does your child listen without interrupting when someone talks? YES NO

Does your child share and take turns? YES NO

Does your child know your phone number(s)? YES NO

Does your child know your home address(es)? YES NO

Does your child recite poems, rhymes, or songs? YES NO



## REPORT OF HEALTH EXAMINATION FOR SCHOOL ENTRY

To protect the health of children, California law requires a health examination on school entry. Please have this report filled out by a health examiner and return it to the school. The school will keep and maintain it as confidential information.

**PART I TO BE FILLED OUT BY A PARENT OR GUARDIAN**

CHILD'S NAME—Last  First  Middle  BIRTH DATE—Month/Day/Year

ADDRESS—Number, Street:  City  ZIP code  SCHOOL

**PART II TO BE FILLED OUT BY HEALTH EXAMINER**

**HEALTH EXAMINATION**

**NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.**

REQUIRED TESTS/EVALUATIONS	DATE (mm/dd/yy)
Health History	/ /
Physical Examination	/ /
Dental Assessment	/ /
Nutritional Assessment	/ /
Developmental Assessment	/ /
Vision Screening	/ /
Audiometric (hearing) Screening	/ /
TB Risk Assessment and Test, if indicated	/ /
Blood Test (for anemia)	/ /
Urine Test	/ /
Blood Lead Test	/ /
Other	/ /

**IMMUNIZATION RECORD**

Note to Examiner: Please give the family a completed or updated yellow California Immunization Record. Note to School: Please record immunization dates on the blue California School Immunization Record (PM 286).

VACCINE	DATE EACH DOSE WAS GIVEN				
	First	Second	Third	Fourth	Fifth
POLIO (OPV or IPV)					
DIAP/DTP/DTd (diphtheria, tetanus, and [acellular] pertussis) OR (tetanus and diphtheria only)					
MMR (measles, mumps, and rubella)					
H1B MENINGITIS (Haemophilus influenzae B) (Required for child care/preschool only)					
HEPATITIS B					
VARICELLA (Chickenpox)					
OTHER (e.g., TB Test, if indicated)					
OTHER					

**PART III ADDITIONAL INFORMATION FROM HEALTH EXAMINER (optional)**

**RELEASE OF HEALTH INFORMATION BY PARENT OR GUARDIAN**

Fill out if patient or guardian has signed the release of health information.

- Examination shows no condition of concern to school program activities.
- Conditions found in the examination or after further evaluation that are of importance to schooling or physical activity are: *(please explain)*

I give permission for the health examiner to share the additional information about the health check-up with the school as explained in Part III.

Please check this box if you *do not* want the health examiner to fill out Part III.

Signature of parent or guardian  Date

Name, address, and telephone number of health examiner

Signature of health examiner  Date

*If your child is unable to get the school health check-up, call the Child Health and Disability Prevention (CHDP) Program in your local health department. If you do not want your child to have a health check-up, you may sign the waiver form (PM 171 B) found at your child's school.*

CHDP website: [www.dhcs.ca.gov/services/chdp](http://www.dhcs.ca.gov/services/chdp)



## MISSION STATEMENT

In partnership with parents, St. John Fisher School is dedicated to teaching the Catholic faith, promoting academic excellence, and producing caring community builders.

Our daily emphasis is:

*Go in peace to love and serve the Lord and one another.*

## PHILOSOPHY

- We work in partnership with parents to provide a quality education for our students.
- We promote academic excellence in our standards-based curriculum and assessment and provide an atmosphere which is conducive to learning.
- We believe that each child is a unique creation of God.
- We are committed to developing each child's gifts by offering support, inspiration, and a variety of curricular and extra-curricular activities.
- We empower students to strengthen their relationship with Christ by modeling the Catholic faith and integrating Catholic values and traditions throughout the school.
- We help our students recognize and adopt strong moral values and take an active role in their personal development.
- We prepare our students to participate both in the spiritual and liturgical life of the parish community.

## HISTORY OF THE SCHOOL

On May 19, 1961, Cardinal James McIntyre established a new parish named St. Peter Alcantara, and Msgr. Thomas J. McCarthy became the founding Pastor. Early in 1962, the newly established parish was renamed after St. John Fisher, and in September 1962, school programs began in temporary facilities. The permanent school was dedicated in January 1963, administered by the Daughters of Jesus and Mary. In 1970, due to a shortage of personnel, the Daughters of Jesus and Mary withdrew from the school. The Sisters of the Immaculate Heart of Mary accepted administration of the school until 2000, after which time a lay principal has administered the school.



## FUNDRAISING

Tuition and Fees cover only a **part** of the total cost of providing education at St. John Fisher School. Each family is required to participate in the fundraising program. Your participation is vital to the success of St. John Fisher in attaining its fundraising goal, the proceeds of which directly impact student learning.

All families agree to supplement tuition and fees and assist in school activities and fundraising by assuming responsibility for each of the following:

- **Fall Festival - \$125 per student**

Fall Festival is a celebration of our fall fundraising efforts and is held on a Friday in late October. In the weeks leading up to the event, students solicit donations from friends and family members to raise money for our school. Families or businesses may sponsor our event for an additional fee by advertising their name on the back of the student-designed t-shirt that all students wear on this day. Prizes are awarded to the student and class that raises the most money. During Jog-a-thon, students compete with their classmates in a timed run.

Carnival is held in the afternoon of Jog-a-thon. Each grade sponsors a booth with a game, prizes, and snacks. Students enjoy unlimited games, including visiting the special Eighth Grade Haunted House.

Parent participation is essential at our Fall Festival.

- **Spring Gala Fundraiser and Auction - \$350 per family**

Each family will pre-pay for two tickets (\$350) to the annual Spring Gala Fundraiser and Auction. Each family must either donate or solicit an auction item for the Fundraiser valued at least \$100. Each class will also have a special project or event to be auctioned at the fundraiser. (Additional cost to be determined.)



## SERVICE HOURS PROGRAM

<p>Total Requirement = 40 hours per family          If you know you are unable to fulfill this requirement, you may buy out for \$800.</p>	
<p><b>REQUIRED</b></p> <p>Lunch and Recess Supervision: 8 days          (each 1-hour shift earns 1.5 hours)</p> <p>Health Room: 1 full day or 2 half-days</p> <p style="text-align: center;"><i>19 hours</i></p>	<p><b>OTHER OPPORTUNITIES</b></p> <p>School Events: Traffic Duty, Hospitality, Yearbook, Art at Your Fingertips, Career Day, International Day, Fall Festival, Fundraiser Gala, Decathlon/Sports Coach</p> <p>Class Events: Room Parent, Field Trip Chaperone, Class Party Planner, Other Class Events</p> <p style="text-align: center;"><i>21 hours</i></p>

Service Hours provide parents with an opportunity to be present in their children’s school experience and provide the school with necessary support in maintaining a safe environment and enriching programs. Each family is required to perform forty hours of service during the school year. Families must complete eight yard duties (12 hours of service), one full day of health room (7 hours of service), and twenty-one (21) remaining service hours by volunteering for events during the school year.

Lunch Duty signups are available via *Gradelink*. Each one-hour shift earns one and a half service hours, valued at \$30. Parents who do not sign up for Lunch Duty shifts will be billed \$240 through FACTS. If you sign up for a shift but do not serve or secure a substitute, you will be billed \$30 through FACTS. We are counting on your support to keep all of our children safe during lunch and recess.

Health Room signups are available via *Gradelink*. Please sign up for one full-day or two half-day shifts. If you do not sign up for a Health Room shift, you will be billed \$140 through FACTS (7 hours at \$20 per hour). If you sign up for a shift but do not serve or secure a substitute, you will be billed accordingly.

Please note attendance at school or class events by family members does not qualify as service hours unless family members have actively volunteered. The event chairperson is responsible for assigning specific tasks and keeping a record of volunteer assignments.

Parents are responsible for logging all completed service hours in the binder in the school office.

**Service Hours Program Buy-out Option:** If a family is unable to perform the required 40 hours of service, including the Lunch Duty Requirement, a family may elect to buy-out with a one-time fee of \$800 to be exempt from the Service Hours Program. A family who has not completed the required service hours by the end of May will be billed at the rate of \$20 per hour for the number of service hours not completed.

Service hours are *not* earned in exchange for purchasing items for class, school, or extracurricular events.



St. John Fisher School  
**Tuition and Fees**  
 2025 - 2026 Academic Year

5446 Crest Road  
 Rancho Palos Verdes, CA 90275  
 Tel: 310-377-2800  
 Fax: 310-377-3863  
[www.sjfpv.org](http://www.sjfpv.org)  
 Email: principal@sjf.org

*Subject to change for 2026-27 Academic Year*

2025 - 2026 TUITION RATES				2025 - 2026 TUITION RATES			
<u>Discounted Active Parishioner Rate (Grades K - 8)</u>				<u>Non-Parishioner Rate (Grades K - 8)</u>			
	10-Months	Semi-Annual	Annually		10-Months	Semi-Annual	Annually
1 student	\$ 778.00	\$ 3,890.00	\$ 7,780.00	1 student	\$1,206.50	\$ 6,032.50	\$12,065.00
2 students	\$1,556.00	\$ 7,780.00	\$15,560.00	2 students	\$2,413.00	\$12,065.00	\$24,130.00
3+ students	\$1,945.00	\$ 9,725.00	\$19,450.00	3 students	\$3,619.50	\$18,097.50	\$36,195.00
<u>Transitional Kindergarten (TK)</u>				<u>Transitional Kindergarten (TK)</u>			
	\$ 846.50	\$ 4,232.50	\$ 8,465.00		\$ 846.50	\$ 4,232.50	\$ 8,465.00
<u>International (K - 8)</u>				<u>International (K - 8)</u>			
Per student	\$2,285.00	\$11,425.00	\$22,850.00	Per student	\$2,285.00	\$11,425.00	\$22,850.00

**Active Parishioner at St. John Fisher Church.** To qualify for the discounted tuition rate, family must be registered St. John Fisher parishioner at the time of enrollment and practicing Catholics, supporting the parish through weekly attendance at Mass and use of weekly offering envelopes or Push Pay attendance coupons, and regularly participating in the sacraments and parish activities. Active Parishioner status will be evaluated periodically.

**FACTS Online Tuition Management.** All payments for tuition and fees must be made through this online site. **No tuition payments will be accepted at the School or Parish Office.** There is a FACTS annual processing fee of \$25 for 1 or 2 installments and \$55.00 for 10-monthly payment plan. Families that have yet to register in FACTS are to visit the school website ([www.sjfpv.org](http://www.sjfpv.org)) and click on the "Admissions Application Procedure". Click on "SIGN UP FOR FACTS". Once you are on FACTS landing page, click on "Parent Log In". Select Payment Plans from the drop down. You will be prompted to create a username and password and to set up your payment plan. In the event FACTS is unable to debit your account for the tuition due, you will be assessed a \$30 returned-payment fee by FACTS in addition to \$25 late fee that the school assesses.

**Tuition Fees** -full payment plan, first installment of the semi-annual plan and the 10 monthly plans are due **August 1, 2025.**

### Mandatory Other Fees and Fundraising

**Registration Fee**

A non- refundable fee of **\$800** per student is due and payable upon enrollment. Registration fees help cover textbooks, program licensing, software, hardware, student accident insurance, Student Information System (SIS) subscription, standardized testing licenses and Arts At Your Fingertips (AAYF) fee and materials.

**Capital Improvement Fee** *(One-time/Per NEW family)*

A non-refundable fee of **\$500** is **assessed upon acceptance of Student application to attend the School.** This fee is assessed for each new family registering to the School so that new families may contribute to recent/current/future capital expenditures, such as maintenance and improvement of the facility, as all returning families already have done. Due and payable on **July 1, 2025.**

**PTO Fee**

A non-refundable fee of **\$100.00** from each family is due and payable on **July 1, 2025.** This fee helps offset costs for all PTO organized events and hospitality, including but not limited to Back to School Picnic, New Family Orientation, Career Day, and International Day.

**Yearbook**

**\$50** per book per family is due and payable on **July 1, 2025.**

**Graduation Fee** *(8<sup>th</sup> grade only)*

A non-refundable fee of **\$400.00** from each 8<sup>th</sup> grade student is due and payable on **July 1, 2025.** This fee includes a yearbook and helps defray expenses for graduation dinner, gown, diplomas, and academic awards.

**Fall Festival.** \$125.00 per student is due and payable on **July 1, 2025.**

**Spring Gala/Auction**

**\$350** per family is due and payable on **July 1, 2025.** This includes dinner tickets for two (2).

**Class Fund.** A non-refundable fee of \$75.00 per student is due and payable on **July 1, 2025.** Class funds help defray the cost of student enrichment activities organized by each room parent. This includes but not limited to Red Ribbon Week, class projects, Catholic School Week, International Day, California Day, and seasonal class parties.

**Incidentals and Other Miscellaneous Fees.** Incidental charges including but not limited to sports fees, drama, extended daycare and any additional activities will be assessed and billed through FACTS based on participation.



# 2025-26 • At A Glance

2026-27 CALENDAR will be released in Spring 2026

REGULAR SCHOOL DAY HOURS: 7:50 AM - 3:00 PM

MINIMUM DAY HOURS: 7:50 AM - 12:00 PM

EXTENDED CARE BEGINS 15 MIN AFTER DISMISSAL

## AUGUST

8/21 New Family Orientation + Ice Cream Social 5 pm

8/25 First Day of School / **MIN DAY**

8/28 Back to School Night 6-7:30 pm / **MIN DAY**

8/29 School Mass 11 am / **MIN DAY**

## SEPTEMBER

9/1 No School: Labor Day

9/5 **MIN DAY**

9/7 Installation Mass for Msgr. Antonio, 11:00 Mass

9/11 PTO Meeting, 8am

9/14 Back to School BBQ 12pm

9/19 **MIN DAY**

9/29 School Mass 11 am

9/29 - 10/3 PALI Adventures Trip (Gr 6)

## OCTOBER

9/29 - 10/3 PALI Adventures Trip (Gr 6)

10/3 **MIN DAY**

10/5 Faith & Fellowship, 9:00 Mass

10/9 PTO Meeting, 8am

10/13 No School: Columbus Day

10/15 Picture Day (uniforms)

10/17 **MIN DAY**

10/24 Fall Festival

10/27-31 Red Ribbon Week

10/28 School Mass 11 am

10/31 Halloween Parade 8 am / **MIN DAY**

## NOVEMBER

11/2 Faith & Fellowship, 9:00 Mass

11/6 PTO Meeting, 8am

11/11 No School: Veterans Day

11/14 **MIN DAY**

11/14-16 Fall Drama Production

11/19 Picture Retakes (uniforms)

11/21 School Mass 11 am / **MIN DAY**

11/21 End of Trimester 1

11/24-28 Thanksgiving Break

## DECEMBER

12/5 No School: Parent-Teacher Conferences

12/7 Faith & Fellowship, 9:00 Mass

12/8 School Mass 11 am

12/10 Advent Music Festival 6:30 pm

12/11 PTO Meeting, 8am

12/12 **MIN DAY**

12/19 **MIN DAY/NO DAY CARE**

12/24 Ara Coeli Mass 6 pm (Gr 2)

12/22 - 1/2 Christmas Break

## JANUARY

1/5 School Resumes

1/15 PTO Meeting, 8am

1/16 **MIN DAY**

1/19 No School: Dr. Martin Luther King, Jr. Day

1/25 Catholic Schools Week Mass 11 am  
Open House 12-2 pm

1/26-1/30 Catholic Schools Week

1/30 **MIN DAY**

## FEBRUARY

2/6 100th Day of School, Career Day (Gr 6/7/8)

2/12 PTO Meeting, 8am

2/13 **MIN DAY**

2/16 No School: Presidents' Day

2/18 Ash Wednesday Mass 11 am

2/19 Invention Convention (Gr 6/7/8)

2/20 No School: R.E. Congress

2/22 Faith & Fellowship, 9:00 Mass

2/27 International Day (K-3)

## MARCH

3/4 WASC One-Day Visit

3/6 **MIN DAY**

3/7 Academic Decathlon

3/12 PTO Meeting, 8am

3/13 End of Trimester 2

3/14 Spring Gala

3/16-20 Washington, D.C. Trip (Gr 8)

3/18 Spring Portraits (free dress)

3/19 School Mass 11 am

3/20 **MIN DAY**

3/22 Faith & Fellowship, 9:00 Mass

3/27-29 Spring Drama Weekend

## APRIL

4/2 **MIN DAY / NO DAY CARE**

4/3-10 Easter Break

4/13 School Resumes

4/15 School Mass 11 am

4/19 Faith & Fellowship, 9:00 Mass

4/23 PTO Meeting, 8am

4/24 **MIN DAY**

4/27-29 CIMI Trip (Gr 7)

## MAY

5/2 Bingo

5/8 **MIN DAY**

5/14 PTO Meeting, 8am

5/20 May Crowning Mass 10:30am + Family Picnic +  
Spring Music Festival 1:00 pm

5/22 **MIN DAY**

5/25 No School: Memorial Day

## JUNE

6/5 8<sup>th</sup> Grade Awards 8 am / **MIN DAY**

6/6 8<sup>th</sup> Grade Graduation Mass 2 pm

6/10 Sports Day

6/11 Kindergarten Graduation

6/12 School Mass 10 am + Last Day of School / **MIN**



## EXTENDED DAY CARE PROGRAM

St. John Fisher School offers an Extended Day Care Program, under the supervision of the Day Care Director, for those students whose parents desire a safe and caring place for their children to go after school. Students are provided with structured time to complete homework.

The program will commence on the first day of school.

Hours: Full Days: 3:15 to 5:30 PM    Minimum Days—12:15 to 5:30 PM

Any child not picked up 15 minutes after dismissal is automatically considered in the Extended Day Care Program.

Parents may choose to send their child/ren on a regular basis or on an occasional basis referred to as “Drop-Ins”. A fee of \$10.00 for each hour or part of an hour (\$2.50 per fifteen minutes) that a child participates will be charged.

Parents are expected to pick up their children no later than 5:30 PM. Students must be signed out by a parent or other adult specified on the student’s emergency card.

Any student remaining after 5:30 p.m. will be charged at the rate of \$10.00 per minute. Frequent lateness (more than three occasions) in picking up a student will be grounds for terminating the student’s participation in the program. Likewise, failure of a student to comply with the rules and discipline requirements of the program is grounds for terminating the student’s participation.

Fees will be invoiced monthly through FACTS.

<b>EXTENDED DAY CARE FEES</b>	
<b>FLAT MONTHLY RATE</b>	<b>DROP-IN RATE</b>
One child: \$300 Two children: \$375 Three children: \$450	First hour: \$10.00 \$2.50 per 15-minute increments thereafter

## EXTENDED DAY CARE PROGRAM: ENROLLMENT

FAMILY NAME:			
Parent Name:		Mobile Phone:	
Parent Name:		Mobile Phone:	
Student Name:		Grade:	

***Your child will not be permitted to participate in Day Care until this has been signed and returned.***

Our family has received and read the Extended Day Care Program information sheet. We are aware of, understand, and agree to follow the policies and procedures stated above. We acknowledge that the school has the right to amend the day care policies during the school year as needed, and we agree to follow the policies and procedures as may be added or amended.

We understand that:

- We will be charged \$10.00 per minute if we do not pick up our child by 5:30 PM.
- Our child’s participation in the Extended Day Care Program will be terminated if we are late for pick-up on more than three occasions.
- Our child will not be permitted to participate in the Extended Day Care Program if he/she fails to comply with the rules and discipline requirements. Our signatures below indicate our commitment to fulfill our obligations according to the requirements of the Program.

Parent Signature:		Date:	
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Please select one:

- \_\_\_\_\_ I will require Extended Day Care on a daily / regular basis (Flat Rate).
- \_\_\_\_\_ I will require Extended Day Care on an occasional basis (Drop-In Rate).



## SCHOOL STUDENT NON-DISCRIMINATION POLICY

The school, mindful of its mission to be a witness to the love of Christ for all, admits students regardless of race, color, national origin, and/or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school.

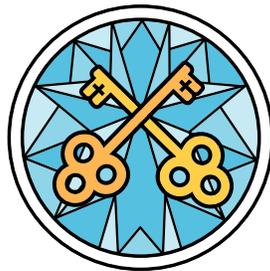
The school does not discriminate on the basis of race, color, disability, medical condition, sex, or national and/or ethnic origin in the administration of educational policies and practices, scholarship programs, and athletic and other school-administered programs, although certain athletic leagues and other programs may limit participation and some archdiocesan schools operate as single-sex schools.

While the school does not discriminate against students with special needs, a full range of services may not always be available to them. Decisions concerning the admission and continued enrollment of a student in the school are based upon the student's emotional, academic, and physical abilities and the resources available to the school in meeting the student's needs. We work in partnership with parents to provide a quality education for our students.



# SACRAMENTAL PREPARATION

STUDENT NAME	
GRADE	
PARENT NAME(S)	
EMAIL OR PHONE	



	BAPTISM	FIRST RECONCILIATION	FIRST COMMUNION	CONFIRMATION
CHECK IF RECEIVED				
CHECK IF YOU'D LIKE MORE INFORMATION				

WE LOOK FORWARD TO WORKING WITH YOU IN THE SACRAMENTAL PREPARATION OF YOUR CHILDREN.

KIM ST. ROMAIN • SJF PARISH RELIGIOUS EDUCATION COORDINATOR • [KST.ROMAIN@SJF.ORG](mailto:kst.romain@sjf.org)

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# St. John Fisher Parish Registration Form

<i>Office Use Only</i>	
Employee Initials: _____	Date Entered: _____
Assigned Env. No.: _____	Guild No.: _____
<input type="checkbox"/> Donor Acct. Type Set	

Welcome to St. John Fisher! We are pleased to have you as part of our faith community and hope that you will find many blessings here. Please fill-out all the information on both sides of this form and return it to the parish office. Thank you!

**LAST NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**MAILING ADDRESS (IF DIFFERENT FROM ABOVE):** \_\_\_\_\_

**EMERGENCY CONTACT NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

(Please list a person not living in your household to be contacted in case of an emergency.)

*Welcome! As part of our parish community we work together to support our parish. It is your generosity that helps your parish thrive! "...if it is serving, then serve; if it is teaching, then teach; if it is to encourage, then give encouragement; if it is giving, then give generously; if it is to lead, do it diligently; if it is to show mercy, do it cheerfully."* Romans 12:7-8

I WOULD LIKE TO SUPPORT MY PARISH USING OFFERTORY COUPONS/ENVELOPES

I WOULD LIKE TO SUPPORT MY PARISH USING ELECTRONIC GIVING WITH PUSHPAY



Scan the QR Code to get started with PushPay!

**HOW CAN WE SERVE YOU? WOULD YOU LIKE TO RECEIVE A PHONE CALL REGARDING ANY FAITH FORMATION, VOLUNTEER OPPORTUNITIES, PARISH SCHOOL, OR ANY OTHER INTEREST OR NEEDS?**

YES  NO

**PLEASE SPECIFY BELOW, WHAT TYPE OF INFORMATION YOU WOULD LIKE TO RECEIVE :**

\_\_\_\_\_

(Please fill out information on other side ➔)

	↓ <b>HEAD OF HOUSEHOLD</b>	↓ <b>SPOUSE</b>	↓ <b>CHILD</b>	↓ <b>CHILD</b>	↓ <b>CHILD</b>	↓ <b>CHILD</b>
<b>TITLE</b> (MR., MRS. DR., ETC)						
<b>FIRST NAME</b>						
<b>MIDDLE NAME</b>						
<b>LAST NAME</b>						
<b>NICKNAME OR MAIDEN NAME</b>						
<b>GENDER (M/F)</b>						
<b>DATE OF BIRTH</b>						
<b>OCCUPATION</b>			N/A	N/A	N/A	N/A
<b>WORK PHONE #</b>			N/A	N/A	N/A	N/A
<b>CELL PHONE #</b>			N/A	N/A	N/A	N/A
<b>E-MAIL</b>			N/A	N/A	N/A	N/A
<b>RELIGION</b>						
<b>BAPTIZED?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO					
<b>DATE &amp; PLACE</b>						
<b>1<sup>ST</sup> COMMUNION?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO					
<b>DATE &amp; PLACE</b>						
<b>CONFIRMATION?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO					
<b>DATE &amp; PLACE</b>						
<b>MARRIED?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO		<b>BY PRIEST?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>DATE &amp; PLACE</b>						