

2011/2012 Registration Form

Greek School
Greek Orthodox Church of the Assumption
430 Sheep Pasture Road, Port Jefferson NY 11777
Phone: 631-473-0829/0894 Fax 631-928-5131

Parent's Names: _____

Address: _____

City/Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ *E-Mail: _____

Emergency Contacts during Greek School (Two Contacts)

Name/Relationship to Child/phone: _____ Name/Relationship to Child/phone: _____

	<u>Date of Birth</u>	<u>September School Grade</u>	
		<u>American</u>	<u>Greek(projected)</u>
Child's Name: _____	_____	_____	_____
Child's Name: _____	_____	_____	_____
Child's Name: _____	_____	_____	_____
Child's Name: _____	_____	_____	_____

* Is Greek the primary language spoken in your home yes _____ No _____

- Families must be current with their 2011 membership in good standing at the Greek Orthodox Church of the Assumption, Port Jefferson. Church Non-member families who are documented members in good standing of a church within the Archdiocese of America will have to pay a non-member fee of \$200
- Tuition & registration fee will be collected during September registration. Tuition payments for families with two or more students will be payable in September (50%) & February (50%); This includes MANDATORY Registration fee.

Signature: _____

Date: _____

<u>Payment Information</u>	<u>(office Use)</u>	<u># of Children</u>	<u>Amount</u>
<u>Tuition</u>	<u>Each Child</u>		
Grades 1-Regents	\$550	_____	_____
Pre-K/Kindergarten	\$325	_____	_____
Mandatory Family Registration Fee \$30 (\$75 after September 6, 2011)			_____
			Total Amount: _____
Payment Info	Check # _____	Date: _____	Amount: _____
at Registration:			Payment:: _____
			Balance: _____