

St. Bridget Parish -- School Community

455 PLYMOUTH STREET
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NEASC ACCREDITED

January 7, 2011

Dear Parents/Guardian:

Our school now projects forward to the 2010/2011 school year. Therefore, it is now necessary to conduct our re-registration process; so strategic planning may be placed into motion. **I am kindly requesting each family to examine carefully the attached form that has to be carefully completed and returned by Friday, January 14th.** Our school receives a substantial number of new applications, so we must begin--in all fairness--to inform the new applicants as to their status. I shall accept new students at the earliest possible date after January 14th, so a timely response will avoid unnecessary stress.

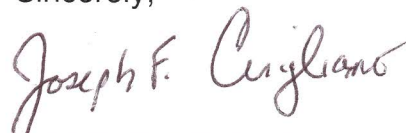
Please be so kind as to notice the following:

1. Please return the **ENTIRE FORM**, even though only one section must be completed.
2. A separate form must be carefully completed for each student.
3. A \$75.00 re-registration fee must accompany each re-registration. The \$75.00 will be credited towards next year's book fee costs. The fee is non-refundable.

After our school has completed the re-registration process, the pastor, administration and School Board will meet to utilize the information. Each reregistering family will later receive a letter that includes next year's tuition, book fees and uniform purchasing information. Most certainly, we cannot project our numbers until we know the composition of next year's student body.

I thank everyone in advance for his/her cooperation.

Sincerely,



Joseph F. Cirigliano
Principal

RE-REGISTRATION FORM FOR SEPTEMBER 2011

Please be so kind as to complete **ONE FORM** for **EACH CHILD**, attending St. Bridget School.

NAME OF STUDENT: _____ **DATE OF BIRTH:** _____

Please print clearly

ADDRESS: _____
number Street Town Zip

PH.#: _____ **PRESENT GRADE:** _____

_____ **WILL ATTEND** St. Bridget School next
(Student's Name) September

PARISH AFFILIATION: _____

PARENT'S/GUARDIAN'S SIGNATURE: _____ **DATE:** _____

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(Please **DO NOT** separate this sheet.)

If (**NOT**) RETURNING, PLEASE COMPLETE THIS PORTION

NAME: _____ will **NOT** be attending
(Student's Name & Grade)

St. Bridget School next September but will be transferring to:

(Name & Address of New School)

Would you kindly explain reason for transfer as the information may be entered on your student's permanent record card!

PARENT'S/GUARDIAN'S SIGNATURE: _____ **DATE:** _____

PLEASE RETURN THIS **ENTIRE FORM** TO ST. BRIDGET SCHOOL BY:
Friday, January 14th.

[] \$75.00 cash/check enclosed with form(This deposit is required for 2011/2012.)

11/17/10