



St. Theresa School

300 Leonard Street
Hellertown, PA 18055
610-838-8161
email: altnst@ptd.net
www.sttheresaot<ej.org

MEMO

April 25, 2018

Re: 2018-2019 Forms

- Emergency Form
- Transportation Request
- Extended Care Form
- Home Language Survey
- Loan of Textbooks
- Photo Release

Thank you for registering your child(ren) at St. Theresa School for the 2018-2019 school year. Our family of faith is special indeed and working with you and your family is a gift.

In order to complete your registration please complete the attached forms and return them to the school office no later than Friday, May 4, 2018. The Public School Transportation Departments begin to schedule the bus route assignments in early May.

In case of an emergency all students are required to have an Extended Care Registration form on file. Thank you for your prompt and kind attention to this memo.

Mrs. Diana Tice, Principal

DIOCESE OF ALLENTOWN
Emergency Information Form

St. Theresa School

1. FAMILY INFORMATION

Student Name _____ Grade _____
Address _____ City _____ State _____ Zip _____
Home Telephone# _____ Home E-Mail Address _____
Date of Birth _____ Place of Birth _____
Public School District _____ ☐ Bus Rider ☐ Wallcer ☐ Car Rider

2. PARENT/GUARDIAN INFORMATION

Student lives with: ☐ Parents ☐ Mother ☐ Father ☐ Other _____
Father's/Guardian's Name _____ Home Tel.# _____
Employer _____ Work Tel.# _____ (ext.) _____
Cell Tel.# L____) _____ Pager# _____ E-Mail _____
Mother's/Guardian's Name _____ Home Tel.# _____
Employer _____ Work Tel.# _____ (ext.) _____
Cell Tel. # L____) _____ Pager # _____ E-Mail' _____

Parents/Guardians listed above have permission to pick up the child unless otherwise indicated. Notify the school principal immediately if there are any court orders restricting non-custodial parents or others from contact with the child. Provide the principal with a copy of the order.

3. CHILD CARE PROVIDER INFORMATION

Those designated below are authorized to pick up my child from school in an emergency:

Child Care Provider's Name _____ Relationship to Child _____
Home Tel.# _____ Work Tel.# _____ (ext.) _____
Cell Tel.# L____) _____ Pager# _____ E-Mail _____

4. LOCAL CONTACT INFORMATION

1. Local Contact's Name _____ Relationship to Child' _____
Home Tel.# _____ Work Tel.# _____ (ext.) _____
Cell Tel. # L____) _____ Pager# _____ E-Mail' _____
2. Local Contact's Name _____ Relationship to Child' _____
Home Tel.# _____ Work Tel.# _____ (ext.) _____
Cell Tel.# L____) _____ Pager# _____ E-Mail _____

5. MEDICAL/PHYSICAL INFORMATION

Doctor's Name _____ Tel.# L____j _____
Hospital Preference _____ Second Choice _____
Insurance Company _____ Policy No. _____ Group No. _____
Dentist's Name _____ Tel. # L____j _____

In a medical emergency, we hereby authorize the school to seek emergency medical assistance for our child if we cannot be reached.

Parent/Guardian Signature

Parent/Guardian Signature

Date

Please keep a copy of this form for your records.- IMPORTANT: Please update your school immediately if any information changes.

STUDENT HEALTH INFORMATION

Student's Name _____ Date of Birth _____

Grade/Teacher _____ Home Tel.#(____) _____

Does your child have a history of any of the *following* conditions? If so, please explain type of medical treatment

YES NO

ADD/ADHD _____

Asthma _____

Diabetes _____

Food or Drug Allergy _____

Bee Sting Allergy _____

Seizure Disorder _____

Condition Limiting Physical Education _____

Migraine Headaches _____

Other Chronic or Recurrent Conditions _____

Glasses/Contacts (Please Circle) (When to be Worn) _____

Presently Taking Medications

Names of Medication

Reasons for Taking Medication

In the event that my child should become seriously ill or injured while in school and require prompt emergency care, I give my permission to the attending physician for any necessary emergency medical treatment.

Parent/Guardian Signature

Parent/Guardian Signature

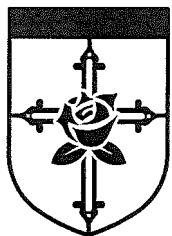
Date

Please Print Name of Parent/Guardian Signature

Please Print Name of Parent/Guardian Signature

Date

Please List Siblings and Grades:



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Dear Parent,

According to Pennsylvania Law, nonpublic school children are entitled to transportation to nonpublic schools as follows:

1. A district, which provides transportation for resident public school students, must also make identical provisions for the transportation of resident nonpublic school students according to the nonpublic school calendar.
2. Transportation for nonpublic school students must be provided to and from the nonpublic school in which the student is enrolled, even if the nonpublic school is located outside the district so long as the distance is not from that 10 miles beyond the district boundaries. (Note this distance maybe in excess of 10 miles from the student's home.
3. A district may transport children who live along hazardous routes even though the children live within walking distance of the school.

IF you think you are eligible for transportation and desire it for the next term, please complete the Request for Transportation from attached and return it to the school immediately.

Mrs. Diana Tice, Principal

REQUEST FOR TRANSPORTATION UNDER ACT 372

(Complete a separate form for each student needing bus transportation)

School Year 2017-2018

Name of Child _____ Birthdate 1/1 Grade =====

Address _____

I ☒ Do ☐ Do not request transportation at this time
(Please check one)

Bus stop (if known) _____

Name of Private School to be attended in September _____

Name of Public School District in which child resides _____

The above child lives approximately _____ miles from the Private School to be attended next school year. If child received Public School District transportation last year, please indicate the Bus# and bus STOP.

Bus# _____ STOP _____

Mother Information

Father Information

Name (Please Print) _____

Home Telephone # _____

Work Telephone # _____

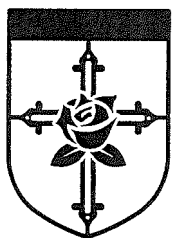
Cell Telephone # _____

Parent Signature(s) _____

Emergency Contact

Name (Please Print) _____

Telephone # _____



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EXTENDED CARE INFORMATION

- Extended Care is provided to students of St. Theresa School at an hourly rate.
- The morning hours are 7:00AM to 8:00AM.
- Afternoon hours are 3:00PM to 6:00PM.
- Extended Care is provided on scheduled Noon dismissals (dismissal through 6:00PM).
- The morning rate is an hourly rate charged on the half hour.
- The after school rate is an hourly rate charged on the half hour.
- A late fee is charged per minute after 6:00PM closing time.
- Extended Care is provided when the school has a morning delay. Extended Care is NOT provided **if** the school dismisses early due to unforeseen circumstances (weather, emergencies, etc.)

(Please be sure your family has notified the school of your child's specific procedure for all unscheduled early dismissals.)

Early Morning Extended Care Procedure:

Extended Care takes place in the Kindergarten Classroom. This is a quiet time. Children may draw, color, play card games, and study and prepare for the school day. A child may also bring a light breakfast to eat at this time. At 8:00AM the children are dismissed to the care of the teacher on duty.

Children may be dropped off at the Kindergarten Classroom door. **THIS APPLIES ONLY TO EARLY MORNING DROP-OFF.**

After School Extended Care Procedure:

The children meet in Friendship Hall for snacks and drinks. Snacks and drinks are provided from home. **If** you choose, you may purchase a snack at a cost of \$.50, Water is provided at no additional cost. You may either pay daily, pre-pay for the week or it will be added to your weekly bill.

At approximately 3:30PM the children proceed to the first grade classroom. 3:30 to 4:30PM is quiet homework time. **If** the child does not have any written homework, he/she is to study quietly or read a library book. It is important to keep a quiet atmosphere in the room for those children who have homework to do. Help with directions is provided; however, homework is NOT checked. It is also the child's responsibility to do the assigned homework. Staff does not check that all assigned homework is completed.

Play time begins at 4:30PM. Outdoor play is unstructured. There are hula hoops and jump ropes. Ball-playing is not permitted at this time due to the wide age range of the children and the problems with balls bouncing outside the recess area.

If the weather does not permit outside play, indoor play consists of assorted games and building materials. On rare occasions, staff might choose a TV program for the children to watch.

If your child takes part in an after school activity, be aware that he/she may not have the complete hour of homework time. Also, if your child wants a snack or drink on those days, it **MUST** be provided from home.

PICK-UP -Please do not drive through the cones. Park your car by the school office or principal's office and walk to the first grade classroom **If** it is raining, you may drive up to the first grade classroom.

After School Extended Care on Early Dismissal Days:

The children meet in Friendship Hall for lunch, which is provided by the home. At approximately 12:45PM, the children proceed to the first grade classroom for homework time. Play time is from 1:45 to 2:45PM. At that time, a movie or a TV program is shown. Another playtime is held afterwards.

Pick-up procedure remains the same.

ST. THERESA SCHOOL EXTENDED CARE PROGRAM
Registration Form

Child's Name: _____
(Last) (First)

Address: _____

Home Phone: _____

Birhdate: _____ Age: _____ Grade: _____

Parent/Guardian with whom child resides:

Name: _____ Occupation: _____

Business Address: _____

Business Phone: _____ Cell Phone: _____

Name: _____ Occupation: _____

BusinessAddress: _____

Business Phone: _____ Cell Phone: _____

Doctor's Name: _____ Phone Number: _____

Address: _____

In case of health and/or emergency pick-up contact:

Name: _____ Phone Number: _____

Relation to child: _____

Name: _____ Phone Number: _____

Relation to child: _____

We need Extended Care (Please circle all your needs)

Morning: Monday Tuesday Wednesday Thursday Friday

After School: Monday Tuesday Wednesday Thursday Friday

Usual afternoon pick-up time is: _____

On Occasion (24 Hour notice) Early Dismissal Days

Please tell us anything about your child that it would be helpful to know:

I affirm that the above information is accurate>

Signature: _____ Date: _____

*Note: There is NO Extended Care on early dismissals due to weather emergencies, etc. Pleae be sure your child knows your plan for dismissal on those days. (Neighbor ...)

Allentown Diocese
HOME LANGUAGE SURVEY*

The Office of Civil Rights (OCR) requires that school districts/charter schools/full day AVIS identify limited English proficient (LEP) students in order to provide appropriate language instructional programs for them. Pennsylvania has selected the Home Language Survey as the method for identification.

School District: _____

Name of Child: _____ Date: _____

Address: _____ Grade: _____

School: _____ Birthplace: _____

1. What is/was the student's first language? _____

2. Does the student speak a language(s) other than English? ☐ Yes ☐ No

If yes, specify the language(s): _____

3. What language(s) are spoken in your home? _____

4. Has the student attended any United States school
in any 3 years during his/her lifetime? ☐ Yes ☐ No

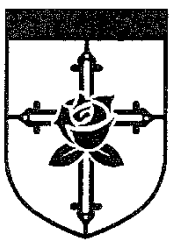
If yes, complete the following:

Name of School	State	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

Person completing this form (if other than parent/guardian): _____

Print/Signatures: _____

*The school district/charter school/full day AVIS has the responsibility under the federal law to serve students who are limited English proficient and need English instructional services. Given this responsibility, the school district/charter school/full day AVIS has the right to ask for the information it needs to identify English Language Learners (ELLs). As part of the responsibility to locate and identify ELLs, the school district/charter school/full day AVIS may conduct screenings or ask for related information about students who are already enrolled in the school as well as from students who enroll in the school district/charter school/full day AVIS in the future.



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Dear Parents,

State law (Act 195) authorizes the loan of textbooks by the Secretary of Education to children in non-public schools. Act 90 authorizes the loan of instructional materials. Our school is now in the process of requesting the specific textbooks and materials to be loaned to your children. The law requires, however, that a parent of each child attending the non public school individually request a loan of textbooks and instructional materials. We are, therefore, enclosing the individual request form. Please sign the form, date *it*, and return it to the school immediately.

Thank you for your continued assistance and cooperation.

Mrs. Diana Tice
Principal

CERTIFICATE OF INDIVIDUAL REQUEST FOR LOAN OF TEXTBOOKS AND INSTRUCTIONAL MATERIALS

I hereby request the loan of textbooks and instructional materials in accordance with Pennsylvania Act 195 and Act 90 for my child/children attending _____ School.

Parent Names (Print)

Date

Parent Signature

Student name(s)

This law is applicable to Pennsylvania residents only.

SPIRITUALITY

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LEADERSHIP

COMMUNITY



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RE: Publicity/Photo/Model Release

Please check the appropriate box, complete the information below and return it to the school office_

D hereby grant the Diocese of Allentown and St. Theresa School full and complete right to take, make and use photographs of my child(ren), alone or with others for public display or publication, (examples: AD Times, Valley Voice, etc.). I hereby release said organizations from any and all liability for doing so.

D I prefer that my child(ren) **NOT** be photographed, alone or with others, for public display or publication, by the Diocese of Allentown and/or St. Theresa School

Student: _____ Grade _____

Student: _____ Grade _____

student: _____ Grade _____

Student: _____ Grade _____

Parent/Guardian Signature

Date

****Please note:** Only Children who have a completed form on file granting permission will have their photographs displayed or published.

SPIRITUALITY

ACADEMICS

LEADERSHIP

COMMUNITY