



God † Scholarship † Community † Service

Good Shepherd Catholic School

835 North Hills Avenue · Ardsley, PA 19038

Advancement Office · advancement@gscregional.org · 215-886-0126

RE-ENROLLMENT FORM FOR THE 2020-2021 SCHOOL YEAR

___ I / we confirm our decision to re-enroll my / our child(ren) at Good Shepherd Catholic School for the 2020-2021 school year. Please kindly re-enroll my / our child(ren).

Please list **each student** and their **grade level for September 2020**:

Student's name: _____ 2020-21 Grade: _____

Student's name: _____ 2020-21 Grade: _____

Student's name: _____ 2020-21 Grade: _____

Student's name: _____ 2020-21 Grade: _____

Note: If you have a student moving from pre-K3 to pre-K4, please indicate whether they will attend 3 or 5 days.

If applicable, please check:

___ I / we have another child (name: _____) I / we will be enrolling as a new student at GSC. I / we will contact the Advancement Director, Jim Templeton, to fill out a new student application form.

Consistent with prior years, the re-enrollment fee (non-refundable) is **\$200 per family**.

Please check one payment option below:

___ I / we have enclosed a check (# _____) to cover the re-enrollment fee.

Please make check payable to "Good Shepherd Catholic School."

___ I / we authorize the Business Office to add our family's re-enrollment fee to our Smart Tuition account. Please charge (*choose one*) ___ the total amount (\$200) or ___ (2) installments of \$100 each to our account, on or beginning with our next billing statement.

___ I / we have decided that we will not re-enroll my / our child(ren) at Good Shepherd Catholic School for the 2020-2021 school year. Please list name(s) and state the reason(s) for not continuing at GSC:

Parent Name

Signature

Date

Thank you!