

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.

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,

Mrs. Colleen M. Guenther

Mrs. Colleen M. Guenther

Principal



#### AGE GUIDELINES

#### TRANSITIONAL KINDERGARTEN (TK)

- Per the California Department of Education, students applying for TK for the 2024-25 school year must turn four years old on or before June 2, 2024.
- 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 for the 2024-25 school year must turn five years old on or before September 1, 2024.
- Kindergarten curriculum is driven by the California Content Standards with an emphasis on developing foundational skills in preparation for first grade.



#### 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 game with prizes and snacks. Students enjoy unlimited snacks and games, including visiting the special Eighth Grade Haunted House.

Parent participation is essential at our Fall Festival.

#### Spring Gala Fundraiser and Auction - \$300 per family

Each family will pre-pay for two tickets (\$300) 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

Total Requirement = 40 hours per family

If you know you are unable to fulfill this requirement, you may buy out for \$800 before September 1.

#### REQUIRED

(as a portion of your 40 hours)

Lunch and Recess Supervision: 8 days (each 1-hour shift earns 1.5 hours)

Health Room: 1 full day or 2 half-days

#### OTHER OPPORTUNITIES

Morning Traffic Duty, Hospitality, Lunch Distribution, Art at Your Fingertips, Gala Fundraiser, Fall Festival, International Day, Career Day, Yearbook

Class Events: Room Parent, Field Trip Chaperone, Class Parties, Other Class Events

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.

Upon enrollment in St. John Fisher School, all families will receive a welcome email from *SchoolSpeak*, our school portal. Each parent will have a unique username and password. During initial login, please update your profile with your contact information, including home address, phone numbers, and email addresses. In the event of an emergency, we are equipped to send text messages, so please include your mobile number(s).

In August, Yard Duty signups will be available on *SchoolSpeak*. Please sign up for eight shifts by September 1. Each one-hour shift earns one and a half service hours, valued at \$30. Parents who do not complete 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 rely on your support to keep all of our children safe during lunch and recess.

In August, Health Room signups will be available on *SchoolSpeak*. Please sign up for one full-day or two half-day shifts by September 1. 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.

SchoolSpeak sends email reminders to alert you of your upcoming commitment.

St. John Fisher School I 5446 Crest Road, Rancho Palos Verdes, CA 90275 I 310 377-2800 I sjfpv.org



## St. John Fisher School **Tuition and Fees**

2024 - 2025 Academic Year

5446 Crest Road Rancho Palos Verdes, CA 90275 Tel: 310-377-2800 Fax: 310-377-3863

www.sjfpv.org
Email: principal@sjf.org

2024 - 2025 TUITION RATES					
Discounted Active Parishioner Rate (Grades K - 8)					
	10-Months	Semi-Annual	Annually		
1 student	\$ 778.00	\$ 3,890.00	\$ 7,780.00		
2 students	\$1,556.00	\$ 7,780.00	\$15,560.00		
3+ students \$1,945.00 \$ 9,725.00 \$19,450.00					
Transitional Kindergarten (TK)					
\$ 846.50 \$ 4,232.50 \$ 8,465.00					
International (K - 8)					
Per student	\$2,285.00	\$11,425.00	\$22,850.00		

2024 - 2025 TUITION KATES							
Non-Parishioner Rate (Grades K - 8)							
10-Months Semi-Annual Annually							
1 student	\$1,206.50	\$ 6,032.50	\$12,065.00				
2 students	\$2,413.00	\$12,065.00	\$24,130.00				
3 students	\$3,619.50	\$18,097.50	\$36,195.00				
<u>Transitional Kindergarten (TK)</u>							
\$ 846.50 \$ 4,232.50 \$ 8,465.00							
<u>International (K – 8)</u>							
Per student	\$2,285.00	\$11,425.00	\$22,850.00				

2025 THITTON DATES

**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 Faith Direct 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 (<a href="www.sjfpv.org">www.sjfpv.org</a>) and click on the "Admission/Tuition" tab. Click on "SIGN UP FOR FACTS HERE". 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.

#### **Mandatory Other Fees and Fundraising**

#### **Registration Fee**

A non- refundable fee of \$800 per student is due and payable upon enrollment. Registration fee helps 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 due 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.

#### PTO Fee

A non-refundable fee of \$100.00 is due from each family upon enrollment. 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 upon enrollment.

#### **Graduation Fee** (8th grade only)

A non-refundable fee of \$400.00 is due from each  $8^{th}$  grade student upon enrollment. 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 upon enrollment

#### Spring Gala/Auction

\$350 per family is due and payable upon enrollment. This includes dinner tickets for two (2).

Class Fund. A non-refundable fee of \$75.00 per student is due and payable upon enrollment. 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.



#### 2024 - 2025 CALENDAR OVERVIEW

First Day of School	August 26
Thanksgiving Break	November 25 – 29
Last Day before Christmas Break	December 20
School Resumes	January 6
Last Day before Easter Break	April 17
School Resumes	April 28
Last Day of School	June 13

Every day of school is an important opportunity for students to connect with classmates and teachers while engaging in learning activities. Attendance is critical to student success. Please make travel arrangements and medical appointments in a way that minimizes school absences.



#### 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—12:30 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 \$8.00 for each hour or part of an hour (\$2.00 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 \$8.00 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.

#### EXTENDED DAY CARE FEES

FLAT MONTHLY RATE

One child: \$275 Two children: \$350 Three children: \$450 DROP-IN RATE

First hour: \$8.00 \$2.00 per 15-minute increments thereafter

#### EXTENDED DAY CARE PROGRAM: ENROLLMENT

FAMILY NAME:			
Parent Name:		Mobile Phor	ne:
Parent Name:		Mobile Phor	ne:
Student Name:		Grade:	
has the right to amen policies and procedur.  We understand that:  We will be comply with	e to follow the policies and procedures stated d the day care policies during the school year res as may be added or amended.  The participation in the Extended Day Care Proramore than three occasions.  Il not be permitted to participate in the Extended the rules and discipline requirements. Our sign to fulfill our obligations according to the requirements.	our child by the sourchild by the sourchild be termeded Day Care gnatures below	5:30 PM. inated if we are late for Program if he/she fails to w indicate our
Parent Signature:		Date:	
	l require Extended Day Care on a daily / regu l require Extended Day Care on an occasiona	·	ŕ



#### 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 2024-2025**



#### 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		
Baptism Date	Church Name & Add	lress	
First Communion Date	Church Name & Add	lress	
Home Telephone	Home Address		
Current School	School Address	Sch	ool Phone #
SJF Parishioner? Y/N	Were you referred to SJF by a current SJF famil	ly? Refe	rring Family
	Ethnic Origin Needed for Census (circle one)	):	
American Indian As	ian White Hispanic African America	n Filipino	Hawaiian

Father's First Name	Middle Name	Last Name			
Birthplace	Religion	Occupation			
Marital Status	Home Address	Email Address			
Home Telephone	Cell Phone	Work Telephone			
Mother's First Name	Maiden Name	Last Name			
Birthplace	Religion	Occupation			
Marital Status	Home Address	Email Address			
Home Telephone	Cell Phone	Work Telephone			
Please indicate why you want your	Please indicate why you want your child to attend St. John Fisher School and your current school/parish involvement:				
Parent Signature:		_Date:			



#### 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. Thank you. The parents of this child gave permission for us to receive your recommendation. Parent/Guardian Signature\_ Date Preschool / Nursery School: Evaluator: Position: Date: Signature: 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? ☐ Yes □ No If yes, please explain: ☐ Yes Can this child sit still for a short period of time to listen to a story or do a □ No How well does this child react when plans change? ☐ Becomes upset ☐ Cries easily ☐ Accepts change Does the child tire easily? Seem overly ☐ Yes □ Sometimes □ Selcom □ No restless/fidgety? Does the child accept consequences without tantrums? ☐ Yes □ No ☐ Yes Is the child easily distracted? □ No Does the child cling to a parent, guardian, or teacher? ☐ Yes □ No **Self Help Skills** Can this child dress him/herself (e.g, buttons, zippers, □ With ☐ Mostly needs □ Yes some help help Can the child take care of his own belongings (e.g., lunchbox, backpack, sweatshirt)? □ No Can the child take care of his/her own bathroom needs? ☐ Yes □ Mostly □ Needs help □ No

Is the child able to easily share items?	☐ Yes	□ No
Does the child use good manners?	☐ Yes	□ No
Does the child play and work cooperatively with others? ☐ Mostly	☐ Sometimes	☐ Has difficulty
Does the child wait his or her turn to speak in a group?	☐ Yes	□ No
School Skills		
Does the child obey classroom, school, and playground rules?	□ Yes	□ No
Can the child follow a:		
Single direction? ☐ Yes ☐ No		
Two-step direction? ☐ Yes ☐ No		
Three-step direction? ☐ Yes ☐ No		
Does the child know his/her first and last name?	□ Yes	□ No
What level of interest does the child show in learning? ☐ High	☐ Average	□ Low
Can this child work independently?	□ Yes	□ No
Does the child use materials (e.g., pencils, glue, scissors) appropriately?	□ Yes	□ No
Does the child know the name of four or more colors?	□ Yes	□ 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?	□ Yes	□ No
Does the child seem emotionally ready for kindergarten?	☐ Yes	□ No

\_\_\_\_\_



#### 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

D	e	V	el	0	p	m	e	n	t

Does your child have any food or environmental allergies? YES NO
If yes, please describe.
Does your child have any health problems of which the school should be aware? YES NO
If yes, please describe.
Does your child have any significant developmental history, such as prematurity,
speech delays, or gross or fine motor issues? If yes, please describe.  YES NO
At what age did your child walk alone? Feed self? Talk in sentences?
Is your child right or left handed? LEFT RIGHT
Does your child dress himself or herself? YES NO
Please check the items your child can do:buttontie shoeszip
Is your child able to skip? YES NO
Is your child able to write his or her first name? YES NO
Can your child take care of his or her bathroom needs? YES NO
Does your child wet the bed? YES NO
What is your child's bedtime? How many hours does your child sleep each night?
Does your child nap? YES NO If yes, for how long?
Does your child participate in any team sports or outside activities? YES NO
If yes, please describe.
<b>Personality</b>
Describe your child.
What are your child's strengths?  What are your child's challenges?

# Department of Health Care Services Child Health and Disability Prevention (CHDP) Program

# 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.

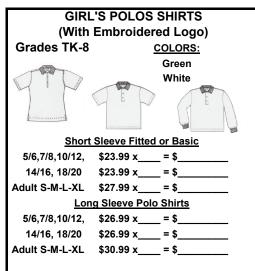
PART I TO BE FILLED OUT BY A PARENT OR GUARDIAN	AN					
CHILD'S NAME—Last		Middle		BIRTH DATE—Month/Day/Year	th/Day/Year	
ADDRESS—Number, Street	Clly	ZIP code	SCHOOL			
PART II TO BE FILLED OUT BY HEALTH EXAMINER						
HEALTH EXAMINATION	IMMUNIZATION RECORD					
NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.	Note to Examiner: Please give the family a complet Note to School: Please record immunization dates of	e the family a completed or up	ed or updated yellow California Immunization Record.	nmunization Rec	ord.	
REQUIRED TESTS/EVALUATIONS DATE (mm/dd/yw)			Consol minimization record (FIM 200).	idilization necoli	(FIVI 200).	
		1		DATE EACH DOSE WAS GIVEN	GIVEN	
Physical Examination / /	VACCINE.		First Second	Third	Fourth	Fifth
Dental Assessment	POLIO (OPV or IPV)					
Nutritional Assessment	perfussis) OR (tetanus and diphtheria only)	tetanus, and [acellular]				
Developmental Assessment	MMR (measles, mumps, and rubella)	rubella)				
Vision Screening	HIB MENINGITIS (Haemonhiire Influenza e)	is Influenzac B)				
Audiometric (hearing) Screening / /	(Required for child care/preschool only)	hool only)				
Blood Test (for anemia)	HEPATITIS B					
Urine Test/	VARICELLA (Chickenpox)					
Blood Lead Test	OTHER (e.g., TB Test, if indicated)	cated)				
Cirie	OTHER					
PART III ADDITIONAL INFORMATION FROM HEALTH EXAMINER (optional)	AMINER (optional) and	RELEASE OF HEA	F HEALTH INFORMATION BY PARENT OR CHARDIAN	AV PARENT O	CHAPPIA	
RESULTS AND RECOMMENDATIONS	l give		health examiner to share the additional information about the explained in Part III	additional inforr	ration about t	the health
Fill out if patient or guardian has signed the release of health information.		lease check this box if you do				
☐ Examination shows no condition of concern to school program activities.		Li rease crieck tills box II you <i>ao</i>	you <i>ao not</i> want the health examiner to fill out Part III.	niner to fill out Pa	#	
☐ Conditions found in the examination or after further evaluation that are of importance to schooling or physical activity are: (please explain)	re of importance to schooling or					
	Sig	Signature of parent or guardian			Date	
	Name	Name, address, and telephone number of health examiner	ber of health examiner			
	Sig	Signature of health examiner			Date	

	SAINT JOHN I	FISHER SCHOOL	
NAME	STUDENT		GRADE
Address		City	Zip
Phone: Day ()	Home ()		Date:2023

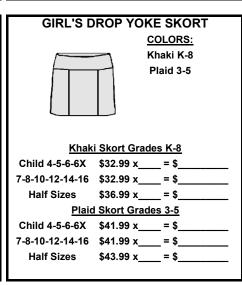
# GIRL'S JUMPER AND PETER PAN Grades TK & K COLORS: Khaki Jumper White Peter Pan blouse Peter Pan Blouse Child 4-5-6-6X \$17.99 x = \$ Child 7-16 \$17.99 x = \$ Jumper w/ Embroidered Logo Child 3-4-5-6-7-8 \$29.99 x = \$



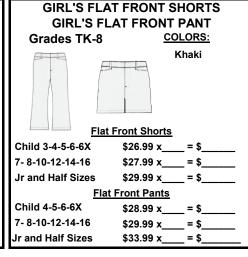














Phone Orders: (310) 832-8342

Internet: www.normansuniforms.com

#### **GIRL'S TACKLE TWILL SWEATSHIRTS** (With Embroidered Logo) **Grades K-8** COLORS: Russell Dark Green Black Crewneck Sweatshirt Child S-M-L \$34.99 x\_\_\_ = \$\_ Adult S-M-L-XL \$39.99 x = \$Adult 2XL \$42.99 x\_\_\_ = \$\_ **Hooded Sweatshirt** Child S-M-L \$39.99 x\_\_\_\_ = \$\_ Adult S-M-L-XL \$45.00 x = \$Adult 2XL \$42.99 x



\$92.00 x = \$

GIRL'S P.E. ITEMS



GIRL'S ACCESSORIES

**Grades TK-8** 

\$9.99 x

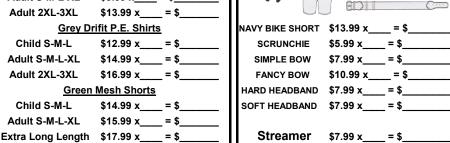
COLORS: Khaki Plaid

Navy or Khaki Belt

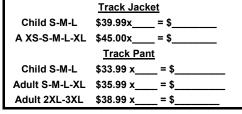
rtault Ext	
GIRL'S T	RACK JACKET
GIRL'S	TRACK PANT
(With Em	broidered Logo)
Grades K-8	COLORS:
	Black Track Jacket
	Black Track Pant
	No.



Adult 2XL-3XL



**BELT 20-38** 



TO ORDER BY PHONE OR FAX:	

#### **MERCHANDISE RETURN INSTRUCTIONS:**

To order by phone, call (310) 832-8342, Tuesday-Saturday from 9:30 AM to 5:30 PM.

If you wish to exchange or return merchandise, you may bring the garment into our store, or we can accommodate you through the mail (UPS).

#### METHODS OF PAYMENT:

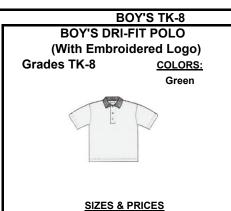
We accept cash, scrip checks and all major credit cards

SUB-TOTAL:	\$
SHIPPING:	\$
ταγ.	¢

TOTAL \$\_\_\_\_\_

	SAINT JOHN FISHER SCHOOL	
NAME	STUDENT	GRADE
Address	City	Zip
Phone: Day ()	Home ()	Date:2023

#### **BOY'S SHORT SLEEVE KNIT POLO BOY'S LONG SLEEVE KNIT POLO** (With Embroidered Logo) **Grades TK-8 COLORS**: Green White **Short Sleeve Fitted or Unisex** 5/6.7/8.10/12. \$23.99 x = \$ 14/16, 18/20 \$23.99 x\_\_\_\_ = \$\_\_\_ Adult S-M-L-XL \$27.99 x = \$ Long Sleeve Polo Shirts 5/6,7/8,10/12, \$26.99 x\_\_\_\_ = \$\_\_\_ 14/16, 18/20 \$26.99 x\_\_\_\_ = \$\_\_ Adult S-M-L-XL \$30.99 x = \$



\$23.99 x\_\_\_\_ = \$\_

\$23.99 x\_\_\_\_ = \$\_

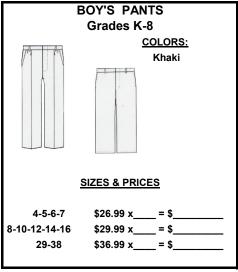
\$27.99 x\_\_\_\_ = \$\_\_

3/4, 5/6,7/8,10/12,

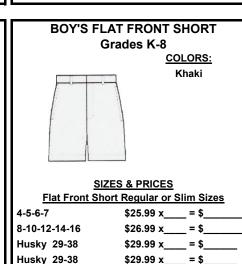
14/16, 18/20

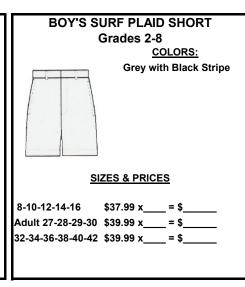
Adult S-M-L-XL

Adult 40"- 48"







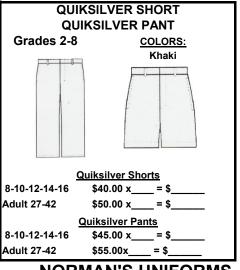




Internet: www.normansuniforms.com / School Code #5446



\$29.99 x\_



Phone Orders: (310) 832-8342 NORMAN'S UNIFORMS

# PUFFY JACKET (With Embroidered Logo) Grades TK-8 COLORS: Black





Puffy Down Jacket with Hood
Child S-M-L \$89.99 x = \$

### Puffy Down Jacket NO Hood Adult S-M-L-XL \$89.99 x = \$ Adult 2XL-3XL \$92.00 x = \$

#### BOY'S HOODED NYLON JACKET 1/4 ZIP JACKET

Grades TK-8 COLORS:

Black



#### **SIZES & PRICES**

Child XS-S-M-L \$49.99 x = \$ Adult S-M-L-XL \$55.00 x = \$

## BOY'S FULL ZIP POLARFLEECE (With Embroidered Logo) Grades TK-8 COLORS: Black



Child XS-S-M	\$39.99 x = \$
Child L-XL	\$39.99 x = \$
Adult S-M-L-XL	\$45.00 x = \$

#### BOY'S TRACK JACKET BOY'S TRACK PANT (With Embroidered Logo)

**Grades K-8** 

**COLORS:** 

Black Track Jacket
Black Track Pant





**Track Jacket** 

Child S-M-L \$39.99x\_\_\_\_ = \$\_\_\_\_

A XS-S-M-L-XL \$45.00x\_\_\_\_ = \$\_\_\_\_

Track Pant

Child S-M-L \$33.99 x = \$

Adult S-M-L-XL \$35.99 x = \$ Adult 2XL-3XL \$38.99 x = \$

#### With Heatseal Logo Grades K-8

BOY'S P.E. ITEMS

#### **Grey Knit P.E. Shirts**

Child S-M-L \$8.99 x = \$ Adult S-M-L-XL \$9.99 x = \$ Adult 2XL-3XL \$13.99 x = \$

**Grey Drifit P.E. Shirts** 

Child S-M-L \$12.99 x = \$ Adult S-M-L-XL \$14.99 x = \$

Child S-M-L \$14.99 x = \$ Adult S-M-L-XL \$15.99 x = \$

Adult S-M-L-XL \$15.99 x = \$ Extra Long Length \$17.99 x = \$

Adult 2XL-3XL

#### BOY'S SOCKS AND BELTS Grades K-8



COLORS: Khaki Stretch Black Leather

White Socks

#### <u>Belts</u>

Waist Sizes 20"- 38"

<u>White Socks</u>

Trimfit \$9.00x\_\_\_ = \$\_\_\_

#### **TO ORDER BY PHONE OR FAX:**

To order by phone, call (310) 832-8342, Tuesday-Saturday from 9:30 AM to 5:30 PM.

#### **MERCHANDISE RETURN INSTRUCTIONS:**

If you wish to exchange or return merchandise, you may bring the garment into our store, or we can accommodate you through the mail (UPS).

#### METHODS OF PAYMENT:

We accept cash, scrip checks and all major credit cards

SHIPPING: \$ \_\_\_\_\_

TAX: \$

TOTAL \$\_\_\_\_\_



#### St. John Fisher Parish Registration Form

Office Use Only				
Employee Initials:	Date Entered:			
Assigned Env. No.:	Guild No.:			
☐ 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 ABOV	Œ):	
EMERGENCY CONTACT NAME: (Plea	PHONE	: <u> </u>
(Pleas	ise list a person not living in your household to be contacted	in case of an emergency.)
Welcome! As part of our parish community we we	ork together to support our parish. It is your gen	erosity that helps your parish thrive!
	n teach; if it is to encourage, then give encouragement; gently; if it is to show mercy, do it cheerfully." Roman	
☐ I WOULD LIKE TO SUPPORT MY PARISH	USING OFFERTORY COUPONS/ENVELO	PES
☐ I WOULD LIKE TO SUPPORT MY PARISH	I USING ELECTRONIC GIVING www.faithdi	rect.net Church Code # CA436)
HOW CAN WE SERVE YOU? WOULD YOU LIKE	TO RECEIVE A PHONE CALL REGARDIN	G ANY FAITH FORMATION,
OLUNTEER OPPORTUNITIES, PARISH SCHOO	OL, OR ANY OTHER INTEREST OR NEEDS	? □ YES □ NO
PLEASE SPECIFY BELOW, WHAT TYPE OF INFO	ORMATION YOU WOULD LIKE TO RECEI	IVE:

	↓HEA HOUSE		↓SPO	USE	↓CHILD	↓CHILD	↓CHILD	↓CHILD
TITLE (MR., MRS. DR., ETC)								
FIRST NAME								
MIDDLE NAME								
LAST NAME								
NICKNAME OR MAIDEN NAME								
GENDER (M/F)								
DATE OF BIRTH								
OCCUPATION					N/A	N/A	N/A	N/A
WORK PHONE #					N/A	N/A	N/A	N/A
CELL PHONE #					N/A	N/A	N/A	N/A
E-MAIL					N/A	N/A	N/A	N/A
RELIGION								
BAPTIZED?	□ YES	□ NO	□ YES	□ NO	☐ YES ☐ NO	☐ YES ☐ NO	□ YES □ NO	□ YES □ NO
DATE & PLACE								
1 <sup>ST</sup> COMMUNION?	□ YES	□ NO	□ YES	□ NO	□ YES □ NO	☐ YES ☐ NO	□ YES □ NO	☐ YES ☐ NO
DATE & PLACE								
CONFIRMATION?	□ YES	□ NO	☐ YES	□ NO	□ YES □ NO			
DATE & PLACE								
MARRIED?		□ YES	□ NO		BY PRIEST?		□ YES □ NO	
DATE & PLACE								



#### Sacramental Preparation

Family Name
Student's Name
Grade
Please check any of the following Sacraments that have already been received.
Baptism
First Reconciliation First Holy Communion
Confirmation
Please check any of the following Sacraments that you would like more information about.
Baptism
First Reconciliation
First Holy Communion Confirmation

Feel free to contact our Parish Religious Education Coordinator, Justin Fontenot, and/or me with any questions or concerns you may have. We look forward to working with you in the Sacramental preparation for your children.

Blessings,
Justin Fontenot
SJF Parish Religious Education Coordinator
<u>Jfontenot@sjf.org</u>

Kristy Gradoville
SJF School Religion Coordinator
kgradoville@sjf.org



#### 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.