



Immaculate Heart of Mary School

Immaculate Heart of Mary Student Care 2024-25 Registration Form

CHILD/CHILDREN ATTENDING:

Name(s) _____ Date of Birth _____ Grade _____

Name(s) _____ Date of Birth _____ Grade _____

Name(s) _____ Date of Birth _____ Grade _____

Parent(s) _____ Phone _____
(Work) (Cell)

_____ Phone _____
(Work) (Cell)

Address: _____ Home Phone _____

_____ Home Phone _____

Email address: _____

Enrollment Options: 3:00-6:00 p.m.

1 child	_____	Full Time	\$235/month
	_____	4 days/week	\$208/month
	_____	3 days/week	\$167/month
	_____	2 days/week	\$120/month

2 children	_____	Full Time	\$364/month
	_____	4 days/week	\$319/month
	_____	3 days/week	\$248/month
	_____	2 days/week	\$172/month

Days Attending:

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

Payments: All families must sign up for tuition payments with FACTS Management. Payment options with FACTS Management are auto withdrawn from your bank or credit card payment with a convenience fee.

Please return this form and a \$35 registration fee will be added to FACTS the first month your child attends student care.

*Your child is not guaranteed a spot until this form and fee are returned

If you have any questions regarding the Student Care Program, please call Michael Olds~ Program Director, at 882-6631 or email oldsm@ihmlansing.org