

Terms, Conditions and Acknowledgements For St. Elizabeth of the Trinity School

Photo Acknowledgment

I consent to St. Elizabeth of the Trinity School using photos/videos of my child(ren) in school and media publications (newsletters, parish bulletin, brochures, etc) as well as on the St. Elizabeth of the Trinity School website and via social media. Failure of consent may limit or prevent participation in select school events.

Photo Acknowledgement: ☐ Yes or ☐ No

EDP and Incidental Payment Policy

Incidentals/EDP (Extended Day Program) payments are required to be on auto-pay. These fees include Sacramental fees and 8th grade graduation fees.

Incidentals/EDP Acknowledgement: ☐ I/We Acknowledge & Agree

Volunteer Service Acknowledgment

I/We agree to complete 20 hours of volunteer service on behalf of St. Elizabeth of the Trinity School. If I/we have not completed the required hours between July 1, 2024 and May 31, 2025, I/we understand we will be billed for any shortage at the rate of \$50/hour in June of 2025.

Volunteer Service Acknowledgement: ☐ I/We Acknowledge & Agree

Parent Handbook

I/We have read and agree to abide by the policies in the parent handbook available on the St. Elizabeth of the Trinity School website now and as they may be revised or amended from time to time.

Parent Handbook Acknowledgement: ☐ I/We Acknowledge & Agree

Tuition and Fees

I/We understand that by completing this form I/we agree to pay all fees and tuition in the amounts and time frame agreed to herein. I/We understand that all fees are non-refundable.

Tuition & Fees Acknowledgement: ☐ I/We Acknowledge & Agree

Withdraw/Withhold Acknowledgement

I/We understand that if my student/s withdraw from the school mid-year, any monthly tuition payments that have already been made will not be refunded and all EDP charges must be paid in full before my tuition contract can be terminated. I/We understand the school may withhold transcripts, report cards, diplomas and/or other school records for any student until all materials and property of the school are returned and all financial obligations are paid in full. These remedies are in addition to all others available to the school, including exclusion from school.

Withdraw/Withhold Acknowledgement: ☐ I/We Acknowledge & Agree

Undesignated Opioid Antagonists

A new Illinois law that went into effect, January 1, 2024, that requires non-public schools to maintain a supply of undesignated opioid antagonists in any secure location where an individual may have an opioid overdose unless there is a shortage of opioid antagonists, in which case the nonpublic school shall make a reasonable effort to maintain a supply of an opioid antagonist.

This policy can be found in the Parent/Student Handbook, on page 54, which is posted on our website. If you would like a copy of the policy, please reach out and I can email it to you. If you have any questions regarding this new policy, please do not hesitate to contact Kristine Hillmann at k.hillmann@stelizabethtrinityschool.org

I, _____, acknowledge that I have received a copy of the
parent/guardian name

School's Supply of Undesignated Opioid Antagonist policy and, I acknowledge that the law provides that the Catholic Bishop of Chicago, St. Elizabeth of the Trinity Catholic School and their employees and agents are to incur no liability or professional discipline, except for willful and wanton conduct, as a result of any injury arising from the administration of an opioid antagonist, regardless of whether authorization was given agree to indemnify and I agree to hold harmless the Catholic Bishop of Chicago, St. Elizabeth of the Trinity Catholic School and their employees and agents against any claims, except a claim based on willful and wanton conduct, arising out of the administration of an opioid antagonist, regardless of whether authorization was given.

Parental Signature _____ Date: _____

Parent(s) Name:

Parent(s) Signature:

Name(s) of students and grade level:

Date: _____