

# St. Leon Armenian School – Registration Form 2024–2025

For more information call 201-791-2862 x7, leave your name and number or email [armenianschool@stleon.org](mailto:armenianschool@stleon.org)  
 Or call Principal Nora Balekji at 973-513-2507. We will return your call as soon as possible.

**PLEASE PRINT CLEARLY**

Student Name	Date of Birth	School Grade	Select Dialect	Select Level
			<input type="checkbox"/> Western <input type="checkbox"/> Eastern	<input type="checkbox"/> K-6 Fridays
			<input type="checkbox"/> Western <input type="checkbox"/> Eastern	<input type="checkbox"/> K-6 Fridays
			<input type="checkbox"/> Western <input type="checkbox"/> Eastern	<input type="checkbox"/> K-6 Fridays
<b>Total Tuition</b>				

**Tuition Payment (Tuition is non-refundable.) \$375 for the first student in family.  
 \$25 discount for additional students in the same family.**

*If you are unable to pay the full tuition, please contact Fr. Diran Bohajian at 201-791-2862. Inquiries will be kept confidential.*

Amount paid in September  uary.

**PLEASE PRINT CLEARLY**

Mother \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Father \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Does your child have any allergies or medical conditions? (Please discuss with the principal)

Allergies \_\_\_\_\_

Medical Conditions \_\_\_\_\_

Please note any pertinent information about your child’s academic ability that would help us better serve his/her needs.  
 Example: Has your child been classified with any developmental, behavioral or learning disabilities?

\_\_\_\_\_  
 \_\_\_\_\_

**I/We GRANT permission for a photo/image that includes my child to be published on any St. Leon church publication and the publications of the Eastern Diocese, and to be displayed in the Armenian School.**

**Circle either Yes or No and sign. Yes No**

**Signature** \_\_\_\_\_