St. Anne School Family Newsletter

Janaury 10, 2018

Dear Parents,

We hope to see all our parents at our upcoming celebration of our school and all Catholic Schools on Sunday, January 28. Our celebration will begin at the 10:30 Mass and then follow with Open House until 1:00. On display in our science lab for everyone to enjoy will be our seventh and eighth grade Science Fair Projects. This event highlights the creative thinking of our Jr. High students as they apply the Scientific Method to their science projects. Come and see our newly retrofitted school and enjoy seeing your child's classroom. Refreshments will be served.

Catholic Schools' Week will also be a week filled with activities for the students. A flyer noting the daily themes and activities will be coming home with next week's Virtual Envelope. Be sure to look for it.

2018 SPELLING BEE FINALISTS

Congratulations to our 2018 Spelling Bee Finalists:
Alistair Buckingham &
Isabella Guzman, 5-1
Wesley Abrams & Zachary Swe, 6-2
Lance Givant & Brian Huang, 7-1
Marcus Ling, 7-2
Ashley Glancy, 8-1
They will compete in the school Spelling Bee on January 12th at 1:30 p.m. in Moriarty Hall.
Parents are welcome to attend.

SCHOOL CLOSED – JANUARY 15

We will be closed Monday, January 15th in observation of *Martin Luther King Day*. School will resume on Tuesday, Jan. 16th.

NEW STUDENT APPLICATONS

We are now accepting applications for the 2018-2019 school year. Applications are available online at www.stanne.com or in the office with Mrs. Finnegan. For questions regarding admission, please call (415) 664-7977.

SCHOOL TOUR – JANAURY 24

Our next school tour for new incoming families will be held January 24th from 9 – 10:30 a.m. If you know of a family member or child interested in coming to our school, please invite them to attend a school tour. To reserve a spot, please contact our school office at (415) 664-7977.

SCHOOL FEDERAL TAX ID NUMBER

As you prepare your taxes for this past year, you may need our school federal tax ID number…#94-1156680.

SECOND QUARTER ENDING & PARENT PORTAL CLOSING

Our second quarter will end January 19th and the My Students Progress grading portal for grades 3-8 will be closing this Friday, January 12. Be

sure to check your child's grades before then.

GRANDPARENTS' DAY – JAN. 31st

Grandparents' Day will be held Wednesday, January 31st at 11:00 a.m. Please make sure to fill out and return the registration form that accompanies this newsletter by Friday, January 19th. Thanks.

HOT/COLD LUNCH PROGRAM

Lunchmasters hot/cold lunch program is now available for parents to order lunches. If you have not registered with Lunchmaster, you can go to: ***thelunchmaster.com*** and use the *school code* ***stannesf.***

MORNING DROP OFF DUTY

Calling All Morning Parents… If you are dropping off and waiting for our morning assembly to be concluded, then I have a "deal" for you!! Our parent volunteer coordinator, Stuart Goldkrantz, and **all** of the parents who drop off their child every morning NEEDS YOUR HELP one morning every week or two (if we get enough volunteers) to help get our students safely out of their car and into the yard. If you are already here at school, won't you please take one morning to help everyone out??? Contact the school office or sign up on the volunteer sign up site if you are able to help.

ANTS: KARATE, TENNIS & YOGA

Our after school Karate, Tennis & Yoga classes will begin the week of January 22nd. Classes are offered for Kindergarten – Fifth grade. Please see the attached registration forms for all classes.

SCRIP CARDS AVAILABLE

Parents may purchase SCRIP through Mrs. Finnegan Monday – Friday 8am – 9am. Safeway scrip cards are are now available.

- Classroom Activity/Game
- Photo Booth
- Light Lunch

St. Anne SAPTO cordially invites student(s) and grandparents to celebrate…

GRANDPARENTS' DAY

with us!

WHEN	WEDNESDAY, JANUARY 31, 2018
WHERE	Escorted arrival through yard middle door
DRIVING INSTRUCTIONS	PARKING IN YARD STARTING AT 11AM
RSVP DUE DATE	FRIDAY, JANUARY 19, 2018
GOT QUESTIONS?	Ann Nip (annlung@comcast.net), or Toni Kleppin (toninepo@gmail.com)

GRANDPARENTS DAY RSVP

NAME OF STUDENT 1: GRADE/CLASS:

NAME OF STUDENT 2: GRADE/CLASS:

NAME OF STUDENT 3: GRADE/CLASS:

TOTAL NUMBER AND NAMES OF GRANDPARENTS: ☐

☐ CHECK HERE IF GRANDPARENT WILL BE PICKING UP AND TAKING CHILD/REN HOME

ANTS Yoga
www.antstennis.com

PLAYER REGISTRATION FORM

Participant Name:_____ Date of Birth:_____

Age Division: (Circle One) K 1st 2nd 3rd 4th 5th

Today's Date_____

Mailing Address:_____
Parent or Guardian Name:_____
Email Address (Please write legibly):_____
Daytime Phone:_____ Cell Phone:_____
Emergency Contact:_____Phone: _____
Special Request:_____

Cost:$279.50 (13 classes)

- Includes: ANTS trained and certified coach, and equipment
- Please make check **PAYABLE TO ST. ANNE SCHOOL,** submit in school office.

REGISTRATION ENDSJANUARY 19th 2018

2018 Schedule:
1/26 - 5/18
Fridays:
k-5th (separated k-2 & 3-5 if reg #'s permit): 3:30-4:30

Please note that registration may be cancelled if team enrollment minimum is not met. Minimum enrollment for each team is 8 players. Registration is FULL at 12 participants per age division.

Release Statement

I, the undersigned, hereby agree to participate in the ANTS program. I certify that, to the best of my knowledge, the minor fore-mentioned is: physically fit and able to engage in the programmed activities. I agree to indemnify and hold the ANTS organization and its employees harmless from any liability, loss, cost or expense (including, but not limited to, attorney's fees, medical fees, and ambulance costs) that I may incur as a result of participation in any program activities. In case of emergency, I give my permission for emergency medical treatment. This statement is also valid for any minors that I allow to participate. My signature acknowledges that I understand and agree to the above conditions.

_____ Initial

Photo Release

I, the undersigned, do hereby freely grant permission to ANTS to videotape and/or take photographs of my son/daughter and me participating in activities in public places and public facilities in the community and do hereby grant them permission to publish the videotapes and/or photographs taken on the ANTS website, television programs, and in the newspaper or other publication for the purpose of promoting ANTS programs.

_____ Initial

Parent/Guardian Signature _____ Date: _____

Printed Name _____

FOR OFFICE USE ONLY

Date: _____ Receipt #: _____ Paid: _____ Check _____ Cash _____ Credit Card Staff Initial: _____
Letter & Packet: _____ Group: _____ Coach: _____ Staff Initial: _____

ANTS Karate

PLAYER REGISTRATION FORM

Participant Name:_____ Date of Birth:_____

Age Division: (Circle One) K 1st 2nd 3rd 4th 5th 6th

Child Height: (check one)

☐ 3'-3'5"	☐ 3'-3'10"	☐ 3'10" - 4'-3"
☐ 4'3" - 4'8"	☐ 4'8" - 5'1"	☐ 5'1" - 5'6"

Does your child need a GI uniform ($30 more)?

*If your child already has one, they may use their own.

Today's Date_____

Mailing Address:_____
Parent or Guardian Name:_____
Email Address (Please write legibly):_____
Daytime Phone:_____ Cell Phone:_____
Emergency Contact:_____Phone: _____
Special Request:_____

Cost(17 sessions):

Without Gi: $365.5

With Gi: $395.5

- Includes: ANTS trained and certified coach, and equipment
- Please make check **PAYABLE TO ST. ANNE SCHOOL,** submit in school office.

REGISTRATION ENDS JANUARY 21st

2018 Schedule

Thursdays:
1/25 - 5/17
3:30-4:30pm
Grouped Together K-2nd & 3rd-5th

Please note that registration may be cancelled if team enrollment minimum is not met. Minimum enrollment for each team is 8 players. Registration is FULL at 12 participants per age division.

Release Statement
I, the undersigned, hereby agree to participate in the ANTS program. I certify that, to the best of my knowledge, the minor fore-mentioned is: physically fit and able to engage in the programmed activities. I agree to indemnify and hold the ANTS organization and its employees harmless from any liability, loss, cost or expense (including, but not limited to, attorney's fees, medical fees, and ambulance costs) that I may incur as a result of participation in any program activities. In case of emergency, I give my permission for emergency medical treatment. This statement is also valid for any minors that I allow to participate. My signature acknowledges that I understand and agree to the above conditions.
_____ Initial

Photo Release
I, the undersigned, do hereby freely grant permission to ANTS to videotape and/or take photographs of my son/daughter and me participating in activities in public places and public facilities in the community and do hereby grant them permission to publish the videotapes and/or photographs taken on the ANTS website, television programs, and in the newspaper or other publication for the purpose of promoting ANTS programs.
_____ Initial

Parent/Guardian Signature _____ Date: _____

Printed Name _____

FOR OFFICE USE ONLY

Date: _____ Receipt #: _____ Paid: _____ Check _____ Cash _____ Credit Card Staff Initial: _____
Letter & Packet: _____ Group: _____ Coach: _____ Staff Initial: _____

ANTS Tennis League
America's . Next . Tennis . Stars
www.antstennis.com

PLAYER REGISTRATION FORM

Participant Name:_____ Date of Birth:_____

Age Division (going into): (Circle One) K 1ST 2ND 3RD 4TH 5TH 6TH

Child Height: (check one)

☐ 39"-43" tall: Blue ☐ 44"-47" tall: Red ☐ 48"-51" tall: Orange
☐ 52" & over: Green

Does your child need a racquet? ☐ Yes ☐ No

Today's Date_____

Mailing Address:_____
Parent or Guardian Name:_____
Email Address (Please write legibly):_____
Daytime Phone:_____ Cell Phone:_____
Emergency Contact:_____Phone: _____
Special Request:_____

Cost:

Without Racquet -K-2: $301 (14 classes) 3-5th: $301 (14 classes)

With Racquet -$331.00

- Includes: ANTS trained and certified coach, nets, balls, and courts
- Please make check **PAYABLE TO ST. ANNE SCHOOL,** submit in school office.

REGISTRATION ENDS JANUARY 19th .

2018 SCHEDULE 1/22 - 5/14:

k-2: Mondays - 2:30 - 3:20 p.m.

3rd-5th: Mondays - 3:30 - 4:30 p.m.

Please note that registration may be cancelled if team enrollment minimum is not met. Minimum enrollment for each team is 8 players. Registration is FULL at 12 participants per age division.

Release Statement

I, the undersigned, hereby agree to participate in the ANTS Tennis League 12 & under tennis program. I certify that, to the best of my knowledge, the minor fore-mentioned is: physically fit and able to engage in the programmed activities. I agree to indemnify and hold the ANTS Tennis League organization and its employees harmless from any liability, loss, cost or expense (including, but not limited to, attorney's fees, medical fees, and ambulance costs) that I may incur as a result of participation in any program activities. In case of emergency, I give my permission for emergency medical treatment. This statement is also valid for any minors that I allow to participate. My signature acknowledges that I understand and agree to the above conditions.

_____ Initial

Photo Release

I, the undersigned, do hereby freely grant permission to ANTS Tennis League to videotape and/or take photographs of my son/daughter and me participating in activities in public places and public facilities in the community and do hereby grant them permission to publish the videotapes and/or photographs taken on the ANTS Tennis League website, television programs, and in the newspaper or other publication for the purpose of promoting ANTS Tennis League programs.

_____ Initial

Parent/Guardian Signature _____ Date: _____

Printed Name _____

FOR OFFICE USE ONLY

Date: _____ Receipt #: _____ Paid: _____ Check _____ Cash _____ Credit Card Staff Initial: _____
Letter & Packet: _____ Group: _____ Coach: _____ Staff Initial: _____

ST. ANNE 2017 – 2018

YEARBOOK

On Sale Now! Order Here!

Keeping Memories Alive!
Order your yearbook now before they're all sold out!

$30

QUANTITIES ARE LIMITED

Full Color Pictures ◆ 80 Pages

Preschool to 8th Grade ◆ Class Pictures ◆ Faculty
Sports Section ◆ Year Round School Events
Parish Festival, Halloween, Christmas, and so much more…

Please make checks payable to **SAPTO**. Write your **child's name, grade/class, & yearbook** on the check. Submit completed order forms with check to the office.

Child's Name: _____ Grade/Class: _____

Parent's Name: _____ Email: _____

Qty: _____Yearbook(s) x $30 = _____ Date: _____

Thank you for ordering!

If you have any questions, please contact May Lee at tylaukei15@gmail.com