



**STUDENT INFORMATION**

**2023 - 2024 ENROLLMENT FORM  
HALF-DAY, 3-HOUR PROGRAM**

\_\_\_\_\_  
Last First Middle Sex Birth Date

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

**MOTHER'S INFORMATION**

\_\_\_\_\_  
Name Email Address

\_\_\_\_\_  
Cell Phone Work Phone

**FATHER'S INFORMATION**

\_\_\_\_\_  
Name Email Address

\_\_\_\_\_  
Cell Phone Work Phone

Please check your program preference

<b>NEW STUDENT</b>					
<b>Preschool Half Day Program</b> 9 – 12 pm (3 hours) Must be at least 3 years old by Sept. 1 <sup>st</sup> and potty trained.	Days of the week	Monthly Tuition	2-Week Deposit	Non-Refundable Regist. Fee	Regist. Fee + Deposit due at time of enrollment
	Mon/Wed/Fri	324.00	162.00	130.00	292.00
	Tues/Thurs	233.00	116.50	130.00	246.50
	Mon-Fri	557.00	278.50	130.00	408.50

<b>NEW SIBLING STUDENT (10% DISCOUNT)</b>					
<b>Preschool Half Day Program</b> 9 – 12 pm (3 hours) Must be at least 3 years old by Sept. 1 <sup>st</sup> and potty trained.	Days of the week	Monthly Tuition	2-Week Deposit	Non-Refundable Regist. Fee	Regist. Fee + Deposit due at time of enrollment
	Mon/Wed/Fri	291.60	145.80	130.00	275.80
	Tues/Thurs	209.70	104.85	130.00	234.85
	Mon-Fri	501.30	250.65	130.00	380.65

<b>RETURNING STUDENT</b>					
<b>Preschool Half Day Program</b> 9 – 12 pm (3 hours) Must be at least 3 years old by Sept. 1 <sup>st</sup> and potty trained.	Days of the week	Monthly Tuition	2-Week Deposit	Non-Refundable Regist. Fee	Regist. Fee + Deposit due at time of enrollment
	Mon/Wed/Fri	324.00	162.00	115.00	277.00
	Tues/Thurs	233.00	116.50	115.00	231.50
	Mon-Fri	557.00	278.50	115.00	393.50

<b>RETURNING SIBLING STUDENT (10% DISCOUNT)</b>					
<b>Preschool Half Day Program</b> 9 – 12 pm (3 hours) Must be at least 3 years old by Sept. 1 <sup>st</sup> and potty trained.	Days of the week	Monthly Tuition	2-Week Deposit	Non-Refundable Regist. Fee	Regist. Fee + Deposit due at time of enrollment
	Mon/Wed/Fri	291.60	145.80	115.00	260.80
	Tues/Thurs	209.70	104.85	115.00	219.85
	Mon-Fri	501.30	250.65	115.00	365.65

**PARENT NOTES OR COMMENTS**

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**FOR OFFICE USE**

Registration & Deposit Paid \_\_\_\_\_

Check # or Credit Card \_\_\_\_\_

Paid by \_\_\_\_\_

Date \_\_\_\_\_

Balance \_\_\_\_\_

Office Initial \_\_\_\_\_