



# 2024– 2025 ENROLLMENT FORM

## HALF-DAY, 4-HOUR PROGRAM

### STUDENT INFORMATION

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 – 1 pm (4 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	456.00	228.00	130.00	358.00
		Tues/Thurs	327.00	163.50	130.00	293.50
		Mon-Fri	783.00	391.50	130.00	521.50

<b>NEW SIBLING STUDENT (10% DISCOUNT)</b>						
<b>Preschool Half Day Program</b> 9 – 1 pm (4 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	410.40	205.20	130.00	335.20
		Tues/Thurs	294.30	147.15	130.00	277.15
		Mon-Fri	704.70	352.35	130.00	482.35

<b>RETURNING STUDENT</b>						
<b>Preschool Half Day Program</b> 9 – 1 pm (4 hours) Must be at least 3 years old by Sept. 1 <sup>st</sup> and potty trained.	<b>Days of the week</b>		<b>Monthly Tuition</b>	<b>2-Week Deposit</b>	<b>Non-Refundable Regist. Fee</b>	<b>Regist. Fee + Deposit due at time of enrollment</b>
		Mon/Wed/Fri	456.00	228.00	115.00	343.00
		Tues/Thurs	327.00	163.50	115.00	278.50
		Mon-Fri	783.00	391.50	115.00	506.50

<b>RETURNING SIBLING STUDENT (10% DISCOUNT)</b>						
<b>Preschool Half Day Program</b> 9 – 1 pm (4 hours) Must be at least 3 years old by Sept. 1 <sup>st</sup> and potty trained.	<b>Days of the week</b>		<b>Monthly Tuition</b>	<b>2-Week Deposit</b>	<b>Non-Refundable Regist. Fee</b>	<b>Regist. Fee + Deposit due at time of enrollment</b>
		Mon/Wed/Fri	410.40	205.20	115.00	320.20
		Tues/Thurs	294.30	147.15	115.00	262.15
		Mon-Fri	704.70	352.35	115.00	467.35

**PARENT NOTES OR COMMENTS**

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**FOR OFFICE USE**

Registration & Deposit Paid \_\_\_\_\_ Check # or Credit Card \_\_\_\_\_

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

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