

2025 SUMMER ENROLLMENT FORM HALF-DAY, 4-HOUR, <u>TODDLER PROGRAM</u>

STUDENT INFORMATION

Last:	First:	Sex:	Birth Date:	
Home Address:	City	<i>/</i> :.	State:	Zip:
PARENT/GUARDIAN INFO	RMATION			
Name:			Relationship:	
<u>Cell Phone</u>		Email Address		
PARENT/GUARDIAN INFO	RMATION			
Name:			Relationship:	
Cell Phone		Email Address		
Please check your sess	sion preference:			
SESSION 1- June 9 – J	uly 3 (4 weeks)			
\$25.00 Registration	Fee due for each session.			
				
CECCION 2 - 1 4.4	August 7 (4 weeks)			
SESSION 2 - July 14 – A	Fee due for each session.			
				

Please check your program preference. The balance of tuition is due on the first day of each session.

NEW STUDENT RETURNING STUDENT						
Preschool Half Day Program		ays of the week	Non-Refun Total dable Tuition Regist. Fee		Tuition Balance after registration is paid	
9 am – 1 pm (4 hours)		Mon/Wed/Fri	425.00	25.00	400.00	
Must be 18 months by June 9 th .		Tues/Thurs	337.00	25.00	312.00	
_		Mon-Fri	762.00	25.00	737.00	

NEW SIBLING STUDENT (10% DISCOUNT)					
Preschool Half Day Program	D	ays of the week	Total Tuition	Non-Refun dable Regist. Fee	Tuition Balance after registration is paid
9 am – 1 pm (4 hours)		Mon/Wed/Fri	383.00	25.00	358.00
Must be 18 months by June 9 th .		Tues/Thurs	303.00	25.00	278.00
-		Mon-Fri	686.00	25.00	661.00

offic	e use:

Paid registration fee Session 1		Paid registration fee Session 2	
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PARENT NOTES OR COMMENTS:	