



Registration Application

2024-2025

NAME OF CHILD:		Date of Application:
Date of Birth (mm/dd/yyyy):	Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female

PARENT/GUARDIAN INFORMATION

Parent/Guardian #1 Name:	Parent/Guardian #2 Name:
Relationship:	Relationship:
Cell Phone:	Cell Phone:
Mailing Address:	Mailing Address:
Primary Email:	Primary Email:
Employer:	Employer:
Work Phone:	Work Phone:

Status of parents: Married Divorced Widowed Separated Single

If divorced, who has legal custody? Married Divorced Shared Parenting
(please provide schedule below)

**If a court order is in place, St. Mary's Preschool must have a copy on file.*

AUTHORIZATION TO RELEASE CHILD

In case of an emergency, or if I am unable to be reached or pick up my child, I authorize St. Mary's Preschool (SMP) to release my child to the following persons. I understand no further written authorization from me is required for my child to be released to one of the persons listed herein. **I understand that additions or deletions to this list must be submitted in writing for SMP to honor them.**

At least two contacts must be provided upon whom we may call in an emergency to help you with picking up your child. For the safety of your child, persons whom staff members do not recognize WILL be asked for identification, even if they are listed as a designated adult. All persons authorized to pick up must be at least 18 years of age.

Parent/Guardian Signature: _____

Contact #1 Name:	Contact #2 Name:
Relationship to Child:	Relationship to Child:
Phone Number:	Phone Number:
Contact #3 Name:	Contact #4 Name:
Relationship to Child:	Relationship to Child:
Phone Number:	Phone Number:

MEDICAL RELEASE INFORMATION

<p>For all children 5 and under; the most recent immunization form and last physical form is required within 30 days of your child's enrollment at St. Mary's Preschool. You may bring them with you upon your first visit. No grace period after 30 days is given.</p>	Parent/Guardian Initials:
<p>I hereby grant permission for the staff of St. Mary's Preschool (SMP) to seek medical attention for my child if I cannot be reached in the event of an emergency. I agree to hold harmless and release St. Mary's Preschool from all liability arising from any such emergency. I assume responsibility for payment of any services needed.</p>	
<p>As the parent/guardian of the above named child, I certify that he/she is in good physical health and may participate in the normal activities of the program and has no conditions or specific needs that require specific accommodations, unless otherwise indicated below.</p>	

Physician's Name:
Physician's Phone:
Hospital Preference:
Known Allergies:
If allergies are present, please describe symptoms &/or reaction:
Epi Pen needed: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
Does your child have any physical problems or limitations, mental health disorders, developmental disabilities or other problems which might limit his/her participation in our center's program? Please describe.
Any other information you feel we should know about your child:

2024-25 TUITION & FEES

Registration & Annual Material fees are due at the time of registration to secure your child's placement for the 2024-25 school year. Registration & Material fees are non-refundable and non-transferable.

Students choosing to enroll in VPK ONLY are not required to pay the registration fee, instead a VPK certificate and the Annual Material fee is required to secure placement. If you choose to enroll your VPK student in Extended Care, a registration fee is required.

Registration Fees: Current Students \$100 New Students \$150

Registration fee is waived for active members of St. Mary of the Angels Episcopal Church. Church membership will be verified by the Church Administrator.

Annual Material Fee: 2-3 Year Olds - \$250 VPK - \$100

Annual Material Fees cover (among other things) the cost of curriculum and activity consumables. Students will no longer be given a supply list at the start of the school year.

Program Offerings <i>The following is a list of tuition fees according to age and number of days per week the child is registered.</i>		
Two Year Olds (by 9/1/24)	<input type="checkbox"/> 3-Day: \$330 per month (T-Th) 9am-12pm	<input type="checkbox"/> 5-Day: \$500 per month (M-F) 9am-12pm
Three Year Olds (by 9/1/24)	<input type="checkbox"/> 3-Day: \$315 per month (T-Th) 9am-12pm	<input type="checkbox"/> 5-Day: \$485 per month (M-F) 9am-12pm
VPK	<input type="checkbox"/> 5-Day - Available for Children with VPK certificate (M-F) 9am-12pm	

Extended Care Offerings <i>Enrollment in an Extended Care Offering provides a discounted monthly rate, as outlined below. Daily Drop In may be used as needed and is available for the rates listed below.</i>		
Early Care 7:45-9am	Lunch Bunch 12-2pm	Extended Day 12-4pm
<input type="checkbox"/> T-Th \$80 per month <input type="checkbox"/> M-F \$150 per month <input type="checkbox"/> Daily Drop In - \$20	<input type="checkbox"/> T-Th \$110 per month <input type="checkbox"/> M-F \$175 per month <input type="checkbox"/> Daily Drop In - \$20	<input type="checkbox"/> T-Th \$220 per month <input type="checkbox"/> M-F \$350 per month <input type="checkbox"/> Daily Drop In - \$20

TUITION & FEES POLICIES

- Tuition is based annually and is divided into 10 equal payments (Aug-May) for your convenience. Payments are made through ProCare, our tuition portal, via secure ACH transfers. Tuition is invoiced on the 1st of each month and due on the 5th.
- If your account becomes 45 days delinquent, it will be turned over to the church administration for collection. A late charge of \$50 will be added to your account. Additionally, your child will not be able to return to school until the balance is paid in full.
- Regular tuition/fees will be charged even if absences occur. This policy has been adopted because costs for staff and programs remain the same when children are absent.
- If your family is experiencing financial difficulties you may contact Rev. Kevin Bartle, the church rector, to set a meeting to discuss possible accommodations.
- We require a 2-week written notice of withdrawal. Refunds will not be given for any months that your child was in attendance.

I have read and understand the tuition and fees policies above.

I agree to abide by all the above-mentioned policies.

TOTAL MONTHLY TUITION WILL BE: \$ _____

TOTAL DUE NOW (Registration & Annual Material Fees): \$ _____

Checks payable to: St. Mary of the Angels

Credit Card Service Fee: 3%

Current families may choose to be invoiced via ProCare

Parent/Guardian Signature: _____ **Date:** _____