



St. James Catholic Preschool

2023-24 School-Year Registration Form

2 1/2 - 3 Year Olds

Child's Name: _____
Last First

Parents Names: _____
Mother Father

Address: _____

City: _____ Zip: _____

Home Phone: _____ Email address: _____

Cell Phones: _____
Mother Father

Child's Birth Date: _____ Child's Sex: ____Male ____Female

Is your child Fully Potty Trained? YES NO
Registered St. James Parishioner? YES NO
(Registered Parishioners are given priority placement)

How did you hear about us? _____

Did someone refer you? Y N If so, what is their name? _____

Check Program Choice: (Write 1, 2, 3 or 4 for choices)

Monthly Tuition:

_____ 2 Mornings: Tuesday & Thursday, 8:40 to 11:40am	\$400
_____ 2 Mornings: Tuesday & Thursday, 9:00am to 12:00pm	\$400
_____ 2 Mornings: Tuesday & Thursday, 9:10am to 12:10pm	\$400
_____ 3 Mornings: Monday, Wednesday, Friday, 9:00am to 12:00pm	\$480

**A \$200.00 non-refundable registration fee is due upon submission.
Registration Form and payment due to the Preschool Office by March 3, 2023.**

Parent's Signature _____ Date _____

-----**Office Use Only**-----

Date Fee Paid: _____ Amount: \$ _____ Ck #: _____ Cash: _____ Parishioner Status: _____

Placement: Room: _____ Days: _____ am/pm