



St. James Preschool

409 E. Lancaster Avenue, Downingtown, PA 19335
Phone: 610-269-0525

Application

Child's Name _____ Phone _____

Address _____

Email Address _____

Nickname _____ Birthdate _____ Male _____ Female _____

Parent's Name _____ Work Phone _____ Cell Phone _____

Parent's Name _____ Work Phone _____ Cell Phone _____

Babysitter's Name _____ Phone _____ Cell Phone _____

If you cannot be reached in case of emergency, other person(s) to contact:

Name _____ Phone _____ Cell Phone _____

Name _____ Phone _____ Cell Phone _____

List any allergies or medical situations your child may have:

If unable to reach you, do we have permission to have your child treated in case of an emergency?

Signature of parent or guardian _____

Does your child have any condition which would limit participation in certain activities? _____

Child's Physician _____ Phone _____

Hospital Preference _____

Previous school experience:

St. James

Other _____

**IN ORDER TO RESERVE YOUR CHILD'S SPACE,
A \$55.00 FEE MUST ACCOMPANY THIS APPLICATION (non-refundable).**

Registration Agreement

I understand that tuition for the year will be \$ _____. Tuition may be paid in one lump sum or in nine monthly installments of \$ _____. **The first tuition payment is due April 1st and thereafter payable by the first of each month August 1st through March 1st. There will also be a \$25 activity fee to help to cover the cost of field trips and special programs due on September 15th.**

We request 60 days written notice if a child is to withdraw from school. The school's operating budget and teacher salaries are based on full enrollment. Therefore we ask that you please pay tuition on time. **TUITION PAYMENTS ARE NON-REFUNDABLE.**

Signature of Parent _____

PLEASE CHECK ONE OF THE FOLLOWING:

Pre-Kindergarten (entering kindergarten next year, birthdays prior to Sept. 1, 2014)

2 day morning _____ \$175/month
3 day morning _____ \$210/month 3 day afternoon _____ \$210/month
5 day morning _____ \$290/month

Older Threes/Fours (birthdays between September 1, 2014 and June 30, 2015)

2 day morning _____ \$175/month
3 day morning _____ \$210/month 3 day afternoon _____ \$210/month (older 3s only)

Young 3s (birthdays between July 1, 2015 and November 30, 2015)

3 day morning _____ \$210/month

Two and a Halfers (birthdays between September 1, 2015 and March 31, 2016)

2 day morning _____ \$175/month

If younger than 2 ½ please see director for information about My Time and Toddler Talk programs.

PLEASE ATTACH A COPY OF YOUR CHILD'S IMMUNIZATION RECORD.