

# Registration Agreement for St. Clare's Christian Preschool School Year 2019 - 2020

Child's Name: \_\_\_\_\_ M/F: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mom's Name: \_\_\_\_\_ Dad's Name: \_\_\_\_\_

Mom's Phone Number: \_\_\_\_\_ Dad's Phone Number: \_\_\_\_\_

Mom's Email: \_\_\_\_\_ Dad's Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Tour taken: Yes/No**

**Tour#** \_\_\_\_\_

**"Meet & greet" child by Director: Yes/No**

**Days Needed:** \_\_\_\_\_ Monday to Friday(M-F) \_\_\_\_\_ Monday/Wednesday/Friday(MWF) \_\_\_\_\_ Tuesday/Thursday(T/Th)

**Time Needed:** \_\_\_\_\_ Full Day (7:00am-6:00) \_\_\_\_\_ Part Day (9:00am-3:15)

**In accordance with the Preschool's Tuition Fees, I agree to pay the following sums:**

**Payable on Registration:**

Registration Fee: Amount: \$150 Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_

Half-Month Tuition Deposit: Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_

**Total: \_\_\_\_\_ (Make check payable to St. Clare's Preschool)**

**Payable at Start Date:**

Key Deposit: Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_

Pro-rated Tuition: Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_

Ongoing Monthly Tuition: \_\_\_\_\_

**Other Fees**

In September, an Annual Classroom Supply Fee of \$150 is applied to each child's account. In October, a Family Service Fee is applied to each child's account, this fee can be refunded after a family has completed 5 hours of family service, or a family can decide to leave the monies with us to fund ongoing maintenance projects at the school.

**Withdrawal from the Preschool**

With two weeks advance written notice of withdrawal, the Half-Month Tuition Deposit will be refunded. The Registration Fee is not refundable.

**Agreement Modifications**

Modifications to this registration agreement may only be made in writing and must be signed and dated by both parties to be binding. Verbal modification is not binding under this agreement. All licensing documentation must be complete and in school files no later than the first day of attendance at Preschool.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Director Signature:** \_\_\_\_\_ (Sue Orbell 925 462-0938) **Date:** \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Completed by the Director  
Agreed start date: \_\_\_\_\_

Age group: \_\_\_\_\_