St. Joseph's Preschool

Registration & Tuition Agreement – Please fill out **one form per child**

Child's(First and Last) Name _____ **Sex** _____ **Birthdate** _____

Father's Name _____ **Mother's Name** _____ **Home Phone** _____

Daily Email _____ **Cell Phone** _____ **Mom? or Dad?**

Home Address _____ **City**_____ **Zip Code** _____

Registered parishioners at Church of St. Joseph? *yes no* **Children enrolled at St. Joseph's School or Preschool?** *yes no*

PROGRAM REGISTRATION

Please circle your first choice. If we cannot accommodate your first choice, you will be contacted promptly by phone. St. Joseph's Preschool offers priority registration to St. Joseph's parishioners through Feb. 12. Following that date, all registrations are accepted on a rolling basis. Your child's enrollment will be confirmed by Feb. 19, 2010, (or within 10 business days following the receipt of your registration). *Please see the enclosed Registration Policy for more information.*

A. Terrific Threes (9-11:30 am) Tuesday and Thursday (must be 3 by 9/1/10)	**B. Fabulous Fours (9 – 11:30 am)** Monday/Wednesday/Friday (must be 4 by 9/1/10)	**C. Fours/Fives ThriveTime (12:30 -3:30 pm)** Mon./Tues./Wed./Thursday (must be 4 by 9/1/10)	**D. Preschool Plus-afternoons (11:30 am– 3:30 pm)** ***Includes Lunch Bunch, DO NOT register separately***
Monthly Tuition $130	**Monthly Tuition $185**	**Monthly Tuition $230**	**Monthly tuition= dependent on # days per week**
			Mark days desired and add for total monthly cost.
Lunch Bunch Option	Lunch Bunch Option	Lunch Bunch Option	
___ *Tues & Thurs* $50	___ *Mon/Wed/Fri* $75	___ *M/T/W/TH* $100	_____ *Monday* *$88*
___ *Tuesday only* $30	___ *Monday* $30	___ *Monday* $ 30	_____ *Tuesday* *$88*
___ *Thursday only* $30	___ *Wednesday* $30	___ *Tuesday* $ 30	_____ *Wednesday* *$88*
	___*Friday* $30	___ *Wednesday* $ 30	_____ *Thursday* *$88*
		___ *Thursday* $ 30	_____ *Friday* *$88*
Lunch Bunch Sub Total $ _____	*Lunch Bunch Sub Total $_____*	*Lunch Bunch Sub Total $_____*	
MONTHLY TOTAL $	MONTHLY TOTAL $	MONTHLY TOTAL $	Preschool Plus Sub Total ** will be added to Morning Preschool Cost* $

For Office Use Only

Check the payment option you prefer:

_____ **Electronic Funds Transfer (EFT**) from your bank acct. (August – April). No fees.

( ) We currently utilize EFT for tuition. **Choose: ____5th ____20th or ____ both.** Sign below.

( ) We do not have an EFT account. Please send me the forms to set up an EFT account for Preschool Tuition/Fees.

_____ **Credit Card** payment by Master Card, Discover, or American Express (August – April)

***** $41.00 annual enrollment fee plus 2.5% convenience fee per transaction. Appropriate forms will be sent to you directly.

_____ **Billing Service for monthly payment** by personal check (August –April)

***** $45.00 annual enrollment fee for monthly payments. Appropriate forms will be sent to you directly.

_____ **One Payment-in-full** due August, 2010.

Note: After June 15, there will be a $10 administrative fee to change or add program choices, payment plans or payment schedule.

By signing below I authorize St. Joseph's Preschool to debit my bank account on file for the 10/11 Preschool Tuition and fees unless another payment option has been selected above. *Questions about payment options? Please call Michele at 651-789-8351*

Registration Fee. A non-refundable registration fee of **$50/child** is due with this form in order to process this registration. This fee is not applicable to tuition and is separate from school registration. Please make checks payable to "St. Joseph's Preschool." *Return form with $50 to: St. Joseph's Preschool, 1138 Seminole Avenue, West St. Paul, MN 55118*. Keep the pink copy for your records.

Parent/Guardian (signature required) Date

Office use only: Date received_____ Registration Fee Enclosed_____Check #_____ Session Confirm_____ Director _____

White copy –Business Office Yellow Copy – Preschool Pink Copy – Parents *01/10*