St. Andrew's Episcopal Preschool and Kindergarten Enrollment Form Pre-Kindergarten (Monday-Friday) 9:00 a.m. - 12:00 noon

Child's Full Name	Name Used		Sex
Birth Date (Should be 4 on/before Aug	31 unless p	reviously discuss	ed with the Director)
Address	City	·	Zip
Email address			
Father's Name		Occupation	
Employer			
Mother's Name	······································	Occupation	b.
Employer		Cell Phone	L
Names of other children in the household	Age	Sex	Relationship
Child's previous preschool experience (name of			and the state of t
Special concerns or difficulties (health, fears, all	lergies, med	lications, etc.):	
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Person to contact in case of emergency (other	than parent	s) - Please include	phone number:
*If this is your child's first year at St. Andrew's, possible certificate and immunization record. *I am enclosing the \$225 registration fee (check understood that this fee is non-refundable. I also to be withdrawn from school.	payable to	St. Andrew's Pres	chool). It is
Parent Signature		Da	ite
Tuition is \$2250 for the 2025-2026 school year		And the Assessment of the Asse	**************************************

St. Andrew's Preschool and Kindergarten Registration Agreement

Tuition fees are quoted in an amount that reflects the entire school year with several different payment options. There is no advantage or penalty to any of these options, they are simply designed to provide you with the most convenient payment plan for you. In order to help with bookkeeping and budgeting please indicate your preference and return with your registration.

Signature:	Date:
	monthly installments due by the fifth of each month, mber – April: \$225 each
Two is	nstallments: \$900 each due in September and January
One I	ump sum payment due in September (\$1800)
The remaining 80% of th ways:	e payment (\$1800) may be paid in any of the following
10% due in August:	\$225
10% due at registration:	\$225
Tuition: \$2250	
Pre-Kindergarten Class (Monday-Friday)