



Enrollment Forms

2023-2024 School Year

Today's Date: _____ How did you hear about us? _____

Start Date: _____ Is your child potty trained?: Yes / No (Circle One)

Child's Name: _____ Sex: ___ F ___ M
(Last) (First) (Middle)

Name Child Goes By: _____ Birth Date: _____

Previous School Attended: _____ How Long: _____

Child's Address: _____
(Street) (City) (Zip)

Guardian (1): _____
(Last) (First) (Middle)

Guardian Address: _____

Email Address: Guardian (1) _____

Cell: _____ Driver's License #: _____

Employer: _____ Work Phone : _____

Employer Address: _____

Guardian (2): _____
(Last) (First) (Middle)

Guardian Address: _____

Email Address: _____

Cell: _____ Driver's License #: _____

Employer: _____ Work Phone : _____

Employer Address: _____

Approved Pick Up:

Name: _____ Phone Number: _____

Address: _____ Driver's License #: _____

Name: _____ Phone Number: _____

Address: _____ Driver's License #: _____

Emergency Contacts: Must be someone other than a guardian.

Name: _____ Phone Number: _____

Address: _____ Driver's License #: _____

Name: _____ Phone Number: _____

Address: _____ Driver's License #: _____

Name & Ages of Siblings:

Sibling: _____ Age: _____

Sibling: _____ Age: _____

Sibling: _____ Age: _____

Fall Enrollment 2023 - 2024

August - May

August tuition will be prorated. It will be the only month that will be prorated.

Monthly Preschool Day Tuition:

Hours: 8:30 AM - 2:30 PM

Registration Fee : \$150 first child/\$100 second child

Supply Fee: \$150 in August & January

Infant/ Toddler (6 Weeks - 23 Months)	Early Preschool Class (Ages 2-3 Years)	Preschool/ Pre-K Class (Ages 3-4 & Up)
3 Days - \$460	3 Days - \$435	3 Days - \$415
4 Days - \$560	4 Days - \$535	4 Days - \$515
5 Days - \$660	5 Days - \$635	5 Days - \$615

Days Desired: Circle Days Requested

Must attend a minimum of 3 days

Infant/ Toddler: (6 weeks - 23 Months)
M T W TH F
Early Preschool: (2 - 3 Year)
M T W TH F
Preschool (3-4 years)
M T W TH F
Pre-K: (4 & up)
M T W TH F

Extended Day Options For Preschool Day Enrollment Only

If you would like to add a day or more extended care to your Preschool tuition please indicate which day/
days. Extended Day Care is from August to May. Tuition is billed monthly.

Hours: 7 am - 8:30 am, 2:30 pm - 5:30 pm

1 Days - \$80	Extended Day Services AM PM	Infant/ Toddler: (6 weeks - 23 Months) M T W TH F
2 Days - \$160		Early Preschool: (2 - 3 Year)
3 Days - \$240	AM PM	M T W TH F Preschool (3-4 years)
4 Days - \$320		M T W TH F Pre-K: (4 & up) M T W TH F

Monthly Full Extended Day Tuition:

Hours: 7:00 AM - 5:30 PM - Afternoon snack provided

Registration Fee: \$233 first child/ \$155 second child

Supply Fee: \$150 in August & January

Infant/ Toddler (6 Weeks - 23 Months)	Early Preschool Class (Ages 2-3 Years)	Preschool/ Pre-K Class (Ages 3-4 & Up)
3 Days - \$720	3 Days - \$655	3 Days - \$635
4 Days - \$880	4 Days - \$825	4 Days - \$805
5 Days - \$1040	5 Days - \$995	5 Days - \$975

Additional Pricing:

Preschool Drop-In Fee: \$65 - 8:30 AM - 2:30 PM

Extended Care Drop-In Fee: \$25 - 7:00 AM - 8:30 am 2:30 PM - 5:30 PM

Days Desired: Circle Days Requested

<p>Infant/ Toddler: (6 weeks - 23 Months)</p> <p>M T W TH F</p>
<p>Early Preschool: (2 - 3 Year)</p> <p>M T W TH F</p>
<p>Preschool (3-4 years)</p> <p>M T W TH F</p>
<p>Pre-K: (4 & up)</p> <p>M T W TH F</p>

Extended Day Services: (7:00 - 8:30, 2:30 - 5:30)

<p>AM:</p> <p>M T W TH F</p>	<p>PM:</p> <p>M T W TH F</p>
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St. Philip Preschool Tuition Agreement 2023-2024

St. Philip Preschool (“School”) and the undersigned parents (“Parents”), by entering into this tuition agreement to enroll their child listed below (“Student”) for the 2023-2024 school year, executed by the parents on the signed date below, agree as follows:

1. **Consent:** This agreement is entered into with mutual consent of Parents and the School.
2. **Enrollment deposit:** The School requires a \$150 non-refundable enrollment deposit (“Deposit”) to reserve a spot for the student in the Preschool Program 2023-2024 school year and/ or a \$230 non-refundable enrollment deposit (“Deposit”) to reserve a spot for the student in the Full Day Extended Program 2023-2024. The Deposit is not credited towards payment of tuition or fees. Supply fee is \$150 twice a year: August & January
3. **Tuition and charges:** Parents agree to pay the full amount for tuition and fees. Tuition is due on or before the first of each month and late after the third of the month.
4. **Late fees:** Parents understand and agree that a \$35 fee will be assessed for each business day that payment is not current.
5. **Additional fees:** Parents agree that additional fees for school services may be charged during the 2023-2024 school year. Additional fees are due when charged and will be billed and payable through brightwheel or paid directly to the school by check or money order.
6. **Payment obligation:** Parents have an individual and joint obligation to pay all tuition and fees under this agreement. Parents’ failure to pay any amount when due pursuant to the terms of this Agreement, may, at the School’s sole discretion, result in the suspension or dismissal of the Student from the School. Parents shall pay any costs and attorney’s fees the School incurs in collection of Parents’ outstanding balance.
7. **Inclement Weather:** Parents agree that refunds will not be given for school closure due to inclement weather.
8. **Early withdrawal/removal:** Parents must provide at least two weeks signed WRITTEN NOTICE to the Director of School to withdraw the Student from the School during the 2023-2024 school year. Tuition will be collected during the 2-week notice period, and after the 2-weeks notice period, Parents will no longer be responsible for tuition payments pursuant to this Agreement.
9. **Payment agreement:** Parents understand and agree that the majority of the School’s expenses and obligations are incurred on an annual basis, that financial commitments for School services are made based upon anticipated enrollment, and that the educational operating expenses of School do not diminish with the departure of some students over the course of the school year. Parents understand and agree that, regardless of Student’s absence, withdrawal, or dismissal from the School, Parents remain obligated to pay the amount of tuition set forth in sections 3 and 5 of the Agreement, consistent with the 2-week notice period, as liquidated damages and assume full responsibility for payment.

Guardian Signature: _____ Date: _____

Health Form & Medical Information

Child's Name: _____ Date of Birth: _____
(First) (Middle) (Last)

Allergies:

Please list any allergies (food/ environmental) that your child may have. *If your child has a food allergy, a note from your child's doctor will need to be provided.*

Food Restrictions

Please list any food restrictions your child may have.

Special Needs:

Does your child have any special needs? (Diagnosed or Undiagnosed) If so please list them below and explain how they are cared for:

Permission for the Administration of Non-Prescription Diaper Cream

To Child Care Personnel:

I hereby give permission for the below listed non-prescription topical diaper cream or ointment to be administered to my child by a child care staff member of St. Philip Preschool.

I understand that *I must provide* St. Philip Preschool with the topical diaper cream or ointment *in the original container labeled with the child's name*. The permission is limited to the following topical medications: Diaper cream or other ointments free of antibiotic, antifungal, or steroid medications.

Guardian Name: _____

Date: _____

Consent: Please put a check in each box if you wish to give consent to...

- Water Activities :** I give consent for my child to participate in water activities ie... water table play, sprinkler play, splashing/wading pools, swimming pools, and aquatic playgrounds.

 - Social Media/ Photography:** I give consent for my child's picture to be displayed on media sources ie... Facebook, Instagram, St. Philip Preschool Website, and any other media platforms or publications that St. Philip Preschool uses.
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Authorization For Emergency Medical Attention:

In the event of an emergency and I cannot be reached, I authorize St. Philip Preschool to take my child to:

Preferred Hospital: _____

Physician/ Healthcare Professional Name: _____

Address: _____

Phone Number: _____

Admission Health Requirement:

One of the following must be checked for all children as well as the attached up to date immunization record.

- Health Care Professional Statement: I've examined the above named child within the past year and find that they are able to participate in a preschool program.
- A form or handwritten statement from a healthcare provider or clinic.
- A notarized affidavit is provided by the child's parent stating that medical diagnosis & treatment conflict with the tenets and practices of a recognized religious organization of which the parent is adherent or member OR immunization and/or TB testing would be injurious to your child or family, you must obtain a certificate signed by a healthcare professional to that effect and attach it to this form. ‘

Guardian Signature: _____

Date: _____

Immunizations:

We must be provided with documentation that has been validated by a health care professional with a signature or rubber stamp. Students may not start preschool until the office has received either current immunization records or an original Affidavit of Exemption from the State of Texas.

Please attach a VALIDATED Copy of shot records or a State Affidavit of Exemption.

Signature of Healthcare Professional: _____

Date: _____

Hearing & Vision Screening:

State licensing requires all **Four Year Old children** enrolled in a school program to be screened for Hearing & Vision. Hearing & Vision Screening must be completed by the healthcare provider of your choice. Please complete the following information below:

Vision R 20/ _____ L 20/ _____ _____ Pass _____ Fail

Signature: _____

Date: _____

Hearing 1000Hz 2000Hz 4000Hz

R _____ _____ Pass _____ Fail

L _____ _____ Pass _____ Fail

Signature: _____

Date: _____