

St. John's Preschool

2018-2019 Preschool Registration

stjohnspreschoolnaperville.org

750 Aurora Avenue Naperville, IL 60540

630-355-1669

Registration Date _____

Child's Last Name _____ First Name _____ Gender _____

Name to be used at school _____ DOB ____/____/____ Age as of 9/1/18 _____

Street Address _____ City _____

Zip _____ Home Phone _____ Member of St. John's: Y N

Subdivision-and-School District _____

*****DCFS requires 1st year students to present a Birth Certificate at the time of registration.**

Parent/Guardian Information

Please fill out completely.

Mother/Guardian

First Name _____ M.I. _____ Last Name _____

Address _____

Occupation _____ Employed By _____

Home Phone () _____ Cell Phone () _____ Office Phone () _____

Email Address _____

Father/Guardian

First Name _____ M.I. _____ Last Name _____

Address _____

Occupation _____ Employed By _____

Home Phone () _____ Cell Phone () _____ Office Phone () _____

Email Address _____

St. John's Preschool admits students of any race, ethnic or faith background.

Program Choice (Choose One Option)

____ 3-Day Option: Monday/Wednesday/Friday (8:45-11:45) \$245 per month

____ 3-Day Option: Tuesday/Thursday/Friday (8:45-11:45) \$245 per month

____ 4-Day Option: Monday/Tuesday/Wednesday/Thursday (8:45-11:45) \$295 per month

LEARN • PLAY • GROW

Enrichment Classes (Enrichment Only)

___ Little Van Gogh's: Tuesday (12:30-2:00) ___ Mini-Mad Scientist: Wednesday (12:30-2:00)

___ Loving Literature: Thursday (12:30-2:00)

1 enrichment class: \$55/month 2 enrichment classes: \$110/month 3 enrichment classes: \$148/month

Extended Day Choice (Enrichment **Plus Lunch**)

___ 1 day per week ___ 2 days per week ___ 3 days per week

Additional \$20 per month Additional \$40 per month Additional \$60 per month

A minimum of five students are needed in order to offer an enrichment class. If that minimum is not met a space will be made available for your child in another class.

A \$75.00 registration fee must accompany this signed form. I understand that this non-refundable fee secures my child's place at St. John's Preschool for the 2018-2019 school year.

Parent/Guardian Signature _____ Date _____

I/We, _____ Parent/Guardian of _____,
Please Print Parent/Guardian Name(s) Child's Name

Hereby certify that I/we have received a copy of Summary of Licensing Standards and other materials published by the Illinois Department of Children and Family Services.

Parent/Guardian Signature _____ Date _____

I/We have read, understand, and agree to St. John's Preschool's policies on discipline, late pick-up, and pest control as contained in the 2018-2019 Parent Handbook.

Parent/Guardian Signature _____ Date _____

For Office Use Only

Reg. Fee \$ _____	Check # _____	Birth Cert. _____	Cert. of Health _____
Emergency Form _____	Pick-up Form _____	Child Info. _____	Sign-in/Sign-out Form _____