

***St. James Preschool***

***401 Carlwood Drive***

***Miamisburg, Ohio 45342***

***937-865-0272***

***stjamesccc.com***

Dear Parents,

Thank you for your interest in St. James Preschool. We are presently accepting registrations for the 2019-2020 school year. The following information is given to answer the most frequently asked questions. If further information is needed, please call the preschool at 937-865-0272. If I am not available please leave a message and I will return your call as soon as possible.

Children are grouped by age. Since their entrance into kindergarten, in most districts, is based on their age as of September 30th, we use this same date for our beginner and prekindergarten classes. Classes generally have seventeen children and are staffed by two teachers.

Children enrolled in beginners classes must be potty trained and three years old by September 30, 2019. The prekindergarten class will have children who plan to enter kindergarten the following year. Children enrolling in the prekindergarten classes must be four years old by September 30th. All classes will be formed on April 1st according to registration demand.

Most children attend classes at least three days a week. Teachers find that children adjust more quickly and perform better when they come more often. Two day a week classes are offered to meet the needs of busy families who prefer just two days a week. The five day class is an excellent choice for any child who enjoys school and would benefit from more time in a classroom setting interacting with other children his/her own age.

Morning classes meet from 9:00 to 11:25 a.m. The afternoon classes are from 12:20 to 2:45 p.m. We request that children do not arrive before 9:00 a.m. or 12:20p.m. as the teachers are busy preparing for the day's class. A child is never late and should you be detained, please bring your child at any time the class is in session.

There is a $45.00 registration fee. Classes will be filled based on the date this form is returned. Children of church members will be given first priority. Families with children presently or previously enrolled in the preschool will also be given priority until April 1st. We encourage you to return this form as soon as possible. Some classes fill very quickly.

The total tuition is figured for the school year based on the number of days the class is in session. This amount is divided into three equal payments. Payments are made on a quarterly basis but if you prefer you may make monthly payments. Payments are due on the first of September, December, and March. If you prefer monthly payments, payments are due on the first of each month. There will be a payment reduction of 15% for any additional children in a family.

**Days Per Week Three Equal Payments**

2 (T.Th.) $285.00 quarterly ($ 95.00 monthly)

3 (M.W.F.) $375.00 quarterly ($125.00 monthly)

4 (M.T.W.Th.) $495.00 quarterly ($165.00 monthly)

**There is a $45.00 registration fee each year** . When a child is accepted it is for the entire year. If circumstances arise that a child would have to withdraw due to relocation or illness, please give two weeks notice or two weeks tuition so that we can fill the vacancy. The enclosed form may be filled out and returned to the preschool with your registration fee. **If you desire a specific class time, please return your registration form as soon as possible because some classes fill very quickly.**

Sincerely,

Cindy Sorg, Administrator



**S*t. James Preschool***

***401 Carlwood Drive***

***Miamisburg, Ohio 45342***

***Phone: (937) 865-0272***

***stjamesccc.com***

**Child's Name**

Last\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age today \_\_\_\_\_\_\_\_\_\_\_\_ Sex \_\_\_\_\_\_\_\_\_

Days of Enrollment - Please number 1, 2, 3, 4 in order of preference: Classes are offered by need/space availability. Morning classes meet from 9:00am -11:25am. Afternoon classes meet from 12:20pm - 2:45pm.

**Beginners** (Children who will **Prekindergarten** (Children who

be 3 yrs. old by 9/30/2019) will be 4 yrs. old by 9/30/2019)

M.W.F. AM. ( ) T.TH. AM. ( )

T.TH. AM. ( ) M.W.F.AM ( )

M.W.F. PM ( ) M.W.F.PM ( )

4 Day-(M.T.W.TH.) AM ( )

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Father's Full Name) (Mother’s Full Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Father's Occupation) (Mother's Occupation)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Company) (Phone) (Company) (Phone)

Parents are: Married \_\_\_\_\_\_\_\_\_\_ Divorced \_\_\_\_\_\_\_\_\_\_ Single \_\_\_\_\_\_\_\_\_\_ Cohabitating \_\_\_\_\_\_\_\_\_\_

Is either parent a current member of St. James United Methodist Church? Yes\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_

Would you like information about St. James United Methodist Church? Yes\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_

Have other children in the family attended St. James Preschool? Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_

Has this child attended preschool? \_\_\_\_\_\_\_ Where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If this child has attended St. James Preschool, who were his/her teachers? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list all children in the family, including this child, by order of birth

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M F Birth date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M F Birth date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(over)

Parental concerns about child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (over)

Please send this completed form with **$45.00 registration fee** to the above address.

**REGISTRATION FEE IS NON-REFUNDABLE UNLESS WE ARE UNABLE TO PLACE YOUR CHILD BY THE FIRST DAY OF SCHOOL.**

If my child is enrolled, you may have my permission in include his/her name, address, phone number and parents’ names on the class roster:

Yes\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_ Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_