



St. Luke's Preschool 2024-2025 Registration

Child's Name: (last) _____ (first) _____

Birthday: ___/___/___ Gender: Male/Female Age by Sept. 30th, 2024: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Email: _____

Parents: Name: _____ Cell Phone: _____

Name: _____ Cell Phone: _____

Child lives with: mother father both other: _____ (circle)

Church Attending: _____

Please check the class for which you are registering your child: X

Classes subject to change based on enrollment** **Rates below reflect monthly payment

Toddler Classes: (1 by 5/1/2024 & walking by start)

- 2 Days-\$220
- 4 Days-\$325 ***see director if interested***

Days Offered:

- Mon/Wed or Tues/Thurs (circle preference)
- Mon-Thurs

2-year-old Classes: (Must be 2 by 9/30/2024)

- 2 Days-\$220
- 3 Days-\$260
- 4 Days- \$325 *** see director if interested***

- Mon/Wed or Tues/Thurs (circle preference)
- Tues/Wed/Thurs
- Mon-Thurs

3-year-old Classes: (Must *be 3 & potty trained* by 9/30/2024)

- 3 Days-\$260
- 4 Days-\$310

- Tues/Wed/Thurs
- Mon-Thurs

4-year-old Classes: (Must be 4 by 9/30/2024)

- 4 Days-\$315 Mon-Thurs (includes 8 extended days after Spring break)
- 4 Days Extended-\$350 Mon-Thurs (includes extended days every Wed & Thurs until 2pm)

Junior Kindergarten: (Must be 5 by 1/31/2025 or with permission of the director)

- 4 Days-\$390 Mon-Thurs (includes extended days every day until 2pm & all after-school enrichment programs-i.e. Stretch-n-Grow, etc.)

*****Registration Fee- \$100 per child (or \$150 maximum per family/effective 2024-2025)*****

A nonrefundable registration fee is due at the time of registration. This secures your child's spot. September Tuition for all students is due May (1st or 15th) or within 30 days of summer enrollment. Your next tuition payment (October tuition) will be due Sept (1st or 15th). ***See Tuition Contract for these payment options. Also, a 30-day written notice is required for withdrawal.*

I have read and support the expectations and policies set forth in the Parent Handbook found on our website @ stlukespreschoolva.com .

Signature: _____ Date: _____

Medical Release Form

In the event that my child, _____, requires medical attention during school hours and neither parent can be reached, I give St. Luke's Preschool permission to call my child's doctor, _____, at the following phone number(s): _____, and authorize any treatment the doctor feels necessary.

Please list any information about your child's physical or emotional conditions that you feel we should know about in order to better care for your child. (i.e., allergies, special medications, behavioral issues, pertinent family situations, etc.)

If you are a new family, how did you hear about us? _____

If your child has a food allergy that requires an EpiPen, please read and sign below:

If your child has a peanut/tree nut allergy, their classroom will be nut free. If your child has an EpiPen on file with us, the staff will not be allowed to give them any food that was not sent in from home. This includes: birthday treats from classmates, holiday parties, letter of the week celebrations, etc. Parents may leave special snacks to be substituted if the class is having something special. Lunch Bunch is not peanut-free. However, if your child has severe food allergies, accommodations can usually be made to make it safe for your child to stay with us. Please feel free to discuss your concerns with the office staff. I have read and agree with St. Luke's Preschool's policy regarding allergies:

Signature: _____ Date: _____



St. Luke's Preschool 2024-2025 Tuition Contract

Monthly Tuition rates:

2 Day Twos - \$220	2 Day Toddlers - \$220	4 Day Toddlers - \$325 *see Director if interested*
3 Day Threes - \$260	3 Day Twos - \$260	4 Day Twos - \$325 *see Director if interested*
4 Day Fours - \$315 (includes 8 extended days until 2 PM after spring break)	4 Day Threes - \$310	
4 Day Fours with Extended days - \$350 (includes extended day every Wednesday and Thursday until 2pm)		
JK class - \$390 (includes extended day every day until 2PM)		

Please choose from the following payment options:

- Pay tuition monthly.** Automatic Bank Withdraw (ACH): Our bank, Atlantic Union Bank, will automatically deduct monthly tuition from your bank account. The first payment is due May 1, 2024 or at the time of registration if you are registering after May 2024. The payments for the remaining eight months are due on the **1st or 15th of each month**, September 2024 through April 2025. There will be a \$20 late fee for any tuition paid after the 15th of the month.
- Pay semiannually.** A **one month** tuition payment by check or cash is due May 1, 2024, a **four month** tuition payment is due September 1, 2024, and another **four month** tuition payment is due January 10, 2025.
- Pay one installment.** A one month tuition payment by check or cash is due May 1, 2024 and the **remaining tuition payment** is due September 1, 2024.

Changes to your tuition contract can be made at any time. Please contact the Preschool Treasurer, Shirley Gary, to make necessary changes. Any tuition payment received after the 15th of the month will include a late fee of \$20. A student will be dismissed if tuition is not kept current. The fee for a returned check or insufficient funds is \$20.

***** FAMILIES WILL BE REQUIRED TO PAY TUITION FOR EXTENDED VACATIONS IN ORDER TO HOLD THE CHILD'S SPACE. *NO EXCEPTIONS.* A 30-day written notice is required prior to withdrawal. However, if you withdraw after March 1, 2025, you are required to pay the remaining 3 months tuition.**

Child's name

Parent's Signature

Date

Teacher/Class: _____



St. Luke's Preschool 2024-2025

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS (ACH DEBITS)

Please attach a voided check.

Tax ID: 54-0132470

I hereby authorize St. Luke's Preschool, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for debit entries in error to my (our)

_____ CHECKING ACCOUNT or _____ SAVINGS ACCOUNT

DRAFT AMOUNT: _____ DRAFT DATE: 1st or 15th (circle one)

and the financial institution named below, hereinafter called "Depository" to debit and/or credit the same to such account. This will occur 9 times (*May 2024, and once a month September 2024 through April 2025*).

FINANCIAL INSTITUTION: _____ BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

ACCOUNT NO: _____ ROUTING NO: _____
(9 positions)

This authority is to remain in full force and effect until St. Luke's Preschool has received written notification from me (or either of us) of its termination in such time and in such manner as to afford St. Luke's Preschool and the financial institution named above a reasonable opportunity to act on it.

NAME(S): _____

CHILD'S NAME: _____ CLASS: _____

CHILD'S NAME: _____ CLASS: _____

DATE: _____ SIGNED: _____

DATE: _____ *SIGNED: _____

**Two signatures required for accounts in joint names.*

IS THIS A DIFFERENT ACCOUNT THAN WHAT IS ON RECORD? _____ YES _____ NO
_____ NO PREVIOUS RECORD