

**La Cristianita Preschool
and Day Care Center
35522 Camino Capistrano, San Clemente, CA 92672
(949) 496-1405**

**TODDLER REGISTRATION
2017-2018**

CHILD'S NAME _____ BIRTH DATE _____ AGE _____
ADDRESS _____ CITY _____
STATE _____ ZIP _____ NEW: _____ RETURNING: _____
1st PARENT/GUARDIAN'S NAME _____
HOME PHONE _____ CELL _____
HOME ADDRESS IF DIFFERENT _____
EMPLOYMENT _____ WORK PHONE _____

2nd PARENT/GUARDIAN'S NAME _____
HOME PHONE _____ CELL _____
HOME ADDRESS IF DIFFERENT _____
EMPLOYMENT _____ WORK PHONE _____

REGISTRATION FEE: The registration fee of \$130.00 (new student) and \$105.00 (returning student) is NOT REFUNDABLE. Reminder: September tuition is due on August 10.

TUITION PAYMENT PROCEDURES

PLEASE NOTE: All tuition is based on a TEN-MONTH SCHOOL YEAR (September through June.) The tuition rate for the regular school year is divided into ten (10) equal monthly payments, regardless of the number of teaching days in any given month. This is a standard cost per pupil calculation. Tuition is due on or before the 10th of the month prior to the one you are paying for. For example, October's tuition is due on September 10. A 5% late fee will be added to accounts not paid by the 20th. Students cannot be admitted to class if payment is not received by the first of the month. A \$15.00 charge will be added for any returned checks. Accounts that have checks returned twice will be required to make "cash only" payments. There is a \$5 per month service charge for payments made by credit card.

PLEASE INDICATE 1ST AND 2ND CHOICE:

Toddler Programs are available from 7:00am - 6:00pm

___ Tues/Thurs (2 full days) \$494/mo.
___ Mon/Wed/Fri (3 full days) \$718/mo.
___ Mon thru Fri (5 full days) \$1098/mo.

For office use:

Date Received ___/___/___ Classroom _____ Data Entry ___/___/___

OVER

PLEASE READ AND SIGN:

___ I am enrolling _____ for the 2017-2018 school year. To guarantee enrollment, I am enclosing the NON REFUNDABLE registration fee.

___ I understand that my child is being enrolled in a toddler option class that legally can run a ratio of 6 children to 1 teacher.

___ I have checked the days and time I wish to enroll my child and understand if there are any changes I wish to make I must make a written request, and such requests are subject to availability.

___ I have read the Tuition Payment Policy on front page and agree to abide by it.

___ If, after beginning school, it becomes necessary to withdraw my child, I will give La Cristianita Preschool one month's prior notice to their withdrawal date. I am responsible for paying full tuition during the 30 day period.

VACATION CREDIT:

There will be no daily or weekly discounts given to 12 months, daycare or preschool students who are absent from their regular classes or program due to vacation until they have been enrolled in school for an entire year. At that time they may receive a vacation credit for up to one (1) week per year. Written notice is required.

Signatures of Parents or Guardians

Date

NEW FAMILY- PLEASE COMPLETE:

I LEARNED ABOUT LA CRISTIANITA FROM:

___ personal referral from _____

___ an advertisement in _____

___ driving by the school

___ other _____

My home church is: _____ Check here if none _____