

**ST. JOHN CHRISTIAN PRESCHOOL**  
**2020-2021 APPLICATION INFORMATION**

1. Please provide the following to apply:
- Application and Tuition Agreement
  - Non-refundable check for registration/supply fee:
    - 2-day class \$135
    - 3-day class \$155
    - 4-day class \$175
    - 2-day class starting Jan. 2021 \$105

Check will be returned after February 1 if you are put on a waiting list.

***Please make check payable to: St. John Christian Preschool.***

2. **Application materials may be submitted at any time.**

- **Current preschool families** will be added to class lists for Sept. 2020 starting on January 2, 2020, in the order in which forms are received.
- **Alumni preschool families** will be added to the class lists for Sept. 2020 starting on January 20, 2020, in the order in which forms are received.
- **New families** will be added to class lists on February 1 in the order in which forms are received.

Parents will be notified about placement on a class list or waiting list. Fees for anyone on the waiting list will be returned after February 1.

Waiting lists will be used to fill vacancies if any occur. Registration will continue for classes that have openings.

3. Tuition information for the 2020-2021 preschool year is:

**4/5 Year Olds**

M/T/W/TH Program (PM)	\$265/mo.	8:1 teacher/child ratio, maximum 16 students
Must be 5 by 12/31/20		5's Curriculum

M/T/W/TH Program (AM)	\$265/mo.	8:1 teacher/child ratio, maximum 16 students
Must be 4 by 9/30/20		

M/T/W Program (AM)	\$202/mo.	8:1 teacher/child ratio, maximum 16 students
Must be 4 by 9/30/20		

M/T/W Program (PM)	\$202/mo.	8:1 teacher/child ratio, maximum 16 students
Must be 4 by 12/31/20		

**3/4 Year Olds**

M/W Program (AM) or T/TH Program (AM)		
Must be 3 by 9/30/20	\$165/mo.	7:1 teacher/child ratio, maximum 14 students

**3/4 Year Olds**

**Class starts in January 2021**

TH/F Program (AM)	\$165/mo.	7:1 teacher/child ratio, maximum 14 students
Must be 3 by 1/1/21		

The 2020-2021 Parent Handbook will be available on our website, [stjohndublin.org](http://stjohndublin.org), in June.

Please direct questions concerning forms, procedures, or the preschool to Bonnie Stottlemeyer at 614-889-5893 or [preschool@stjohndublin.org](mailto:preschool@stjohndublin.org). We look forward to serving you!

**St. John Christian Preschool 6135 Rings Rd., Dublin, OH 43016 614-889-5893**

**ST. JOHN CHRISTIAN PRESCHOOL**  
**APPLICATION/REGISTRATION FORM**  
**2020-2021**

Child's name: \_\_\_\_\_  
Last Name First Name

Name for class list, charts, etc. \_\_\_\_\_

Birthdate: \_\_\_\_\_ Boy \_\_\_\_\_ Girl \_\_\_\_\_

Child's primary language: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_  
Last Name First Name

Relationship to child: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_  
Last Name First Name

Relationship to child: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

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

Best email address for preschool communication: \_\_\_\_\_

Names and birth dates of other children in the household:

1. \_\_\_\_\_ DOB \_\_\_\_\_ 3. \_\_\_\_\_ DOB \_\_\_\_\_

2. \_\_\_\_\_ DOB \_\_\_\_\_ 4. \_\_\_\_\_ DOB \_\_\_\_\_

Family church home: \_\_\_\_\_

Allergies or other medical concerns: \_\_\_\_\_

Dietary restrictions, including those for medical, religious, or cultural reasons:

\_\_\_\_\_

**ST. JOHN CHRISTIAN PRESCHOOL WILL NOT ADMIT ANY CHILD WHO HAS NOT BEEN IMMUNIZED ACCORDING TO THE STATE REQUIREMENTS UNLESS EXEMPTED BY A PHYSICIAN.**

### CLASS PREFERENCE

Please mark a first and second choice of classes.

_____	Mon./Tues./Wed./Thurs.	12:30-3:00	5 by December 31, 2020	\$265/month
_____	Mon./Tues./Wed./Thurs.	9:00-11:30	4 by September 30, 2020	\$265/month
_____	Mon./Tues./Wed.	9:00-11:30	4 by September 30, 2020	\$202/month
_____	Mon./Tues./Wed.	12:30-3:00	4 by December 31, 2020	\$202/month
_____	Mon./Wed.	9:00-11:30	3 by September 30, 2020	\$165/month
_____	Tues./Thurs.	9:00-11:30	3 by September 30, 2020	\$165/month
_____	Thurs./Fri.	9:00-11:30	3 by January 1, 2021	\$165/month

Comments: \_\_\_\_\_

\_\_\_\_\_  
Signature of parent, custodian, or guardian

\_\_\_\_\_  
Date

Please share with us how you first learned about St. John Christian Preschool. Thanks!

\_\_\_\_\_ Web search      \_\_\_\_\_ Phone Directory      \_\_\_\_\_ Community Events      \_\_\_\_\_ Facebook

\_\_\_\_\_ Referral by \_\_\_\_\_

\_\_\_\_\_ Other (Please specify) \_\_\_\_\_

Date form received \_\_\_\_\_

## ST. JOHN CHRISTIAN PRESCHOOL TUITION AGREEMENT School Year 2020-2021

For the enrollment of \_\_\_\_\_  
(Last Name) (First Name)

1. We understand that the registration/supply fee paid with the registration form is non-refundable unless my child is put on a waiting list.
2. We agree that we are responsible for our child's tuition as listed below.

## 4/5 Year Olds

M/T/W/TH Program	\$2385/year or \$265/mo. X 9
M/T/W Program	\$1818/year or \$202/mo. X 9

### 3/4 Year Olds

M/W Program	\$1485/year or \$165/mo. X 9
T/TH Program	\$1485/year or \$165/mo. X 9
TH/F Program (starting Jan. 2021)	\$825/year or \$165/mo. X 5

Tuition is reduced by \$10/month for church members and 2<sup>nd</sup> child in family registered for the same school year.

3. **We understand that for ease of payment and collection,** our monthly fees are evenly divided among 9 months of operation. (TH/F class is divided by 5 monthly payments.)
4. **We understand that full tuition for each month is required regardless of vacations, illness, or emergency school closings.**  
If our child leaves for an extended trip, we understand we are required to pay tuition during our child's absence.
5. We agree to pay **monthly payments from August through April. (January through May for TH/F class.)**  
**Monthly tuition is due the first (1<sup>st</sup>) of each month.**  
For full-year students:
  - We understand that a tuition deposit is due by August 1 with the preschool forms.
  - This payment may be made by check payable to St. John Christian Preschool.
  - The August payment will be applied to May 2021 and is non-refundable.
  - All tuition payments from September through April will be made through our Tuition Express Program. A form will be sent to me this summer to submit the necessary information for this payment program.
6. If an auto-payment is declined by our bank, we will inform the school immediately with new account information or discuss options with the school.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Registration/supply Fee	Check #	Received By	Date
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