ST. JOHN'S PRESCHOOL

127 State Street Kirkland, WA 98033 425-822-5079 (stjohnpreschool@hotmail.com)

REGISTRATION FORM (2024-2025) *Please Print Clearly*

Child's Name_	Name you wish used			
Date of Birth	Sex M□ F□			
Parent Name_	Parent Name			
Address	Primary Phone			
City, State	ZipPrimary Email			
Please list food	l/bee allergies			
Active St. John	's Episcopal Church member? Yes□ No□			
Siblings and A	ges			
Previous Presc	hool or Group Experience			
Where, or from	whom, did you hear about St. John's Preschool?			
Elementary sch	nool you will most likely attend			
For which Clas	s(es) are you applying? (Classes offered subject to minimum enrollment)			
	Pre-3 Year Old (3 years old on/before 12/31) T & Th 9:00 – 11:30 (\$300/mo)			
	Pre-3 Year Old (3 years old on/before 12/31) W & F 9:00 - 11:30 (\$300/mo)			
	3 Year Old (3 years old on/before 8/31) T & Th 9:00 - 11:30 (\$300/mo)			
	3 Year Old (3 years old on/before 8/31) W & F 9:15 - 11:45 (\$300/mo)			
	3 + Program (4 years old on/before 12/31) M, T, & Th 9:15 - 11:45 (\$350/mo)			
	4 Year Old (4 years old on/before 8/31) M, W, & F 9:00 - 12:00 (\$375/mo)			
	4 Extended (4 years old on/before 8/31) M 12:00–1:00 (\$50/mo)			
	4 Extended (4 years old on/before 8/31) W 12:00-1:00 (\$50/mo)			
	4's Sci. Program (4 years old on/before 8/31) T or Th 9:00–11:00 (\$100/mo)			
	Pre-Kindergarten (5 years old on/before12/31) M,T,W,Th 9:00-1:00 &			
	Friday 9:00-Noon (\$700/mo)			
**N	lo additional registration fee is required for 4's Science or 4's Extended Programs			

TO RESERVE A SPACE FOR YOUR CHILD PLEASE RETURN THIS FORM along with a \$100 non-refundable registration fee per class. (except new registrants and extended programs) A non-refundable supply fee, field trip fee, and first month's tuition are due in June.

For Office Use Only:							
Letter Sent: YES NO Date:	Reg. Fee Paid: Check# OR CC Date:						
Amount Due: \$	PAID- Date/Initials:						