



**ENROLLMENT FORM  
2025-2026**

**Family Name:** \_\_\_\_\_

**Parents' Name(s):** \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Listed  Unlisted

Parent 1 Cell: (\_\_\_\_\_) \_\_\_\_\_

Parent 2 Cell: (\_\_\_\_\_) \_\_\_\_\_

Primary Email(s):  
\_\_\_\_\_

**Child(ren) Enrolling for the 2025 – 2026 school year:**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_



## PROGRAM CHOICES

### 3K (CIRCLE YOUR CHOICE)

**FULL DAY:** Monday - Friday      Monday/Wednesday/Friday      Tuesday/Thursday

**HALF DAY:** Monday - Friday      Monday/Wednesday/Friday      Tuesday/Thursday

**Other:** \_\_\_\_\_

### 4K (5 DAY PROGRAM - CIRCLE YOUR CHOICE)

**FULL DAY:** Monday - Friday      **HALF DAY:** Monday - Friday

**Other:** \_\_\_\_\_

**Enrollment fee: \$50 per child**

**Please return your completed Enrollment Form to the Preschool office.**

The Enrollment Fee can be paid using our online payment system. Access via [SaintThomasWaterford.org/Donate](http://SaintThomasWaterford.org/Donate).

Enrollment is complete, and your child(ren) will be added to the class roster, when both the Enrollment Form and Enrollment Fee are received.

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**(For office use only)**

**ENROLLMENT FORM RECEIVED**

**Date:** \_\_\_\_\_ **By:** \_\_\_\_\_

**ENROLLMENT FEE RECEIVED**

**Date:** \_\_\_\_\_ **Amount Paid:** \_\_\_\_\_ **By:** \_\_\_\_\_