



**ENROLLMENT FORM  
2023-2024**

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

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

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

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

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

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

**Child(ren) Enrolling for the 2023 – 2024 school year:**

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

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



## PROGRAM CHOICES

### 3K (CIRCLE YOUR CHOICE)

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

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

**EXTENDED CARE:** Mon through Fri    Monday/Wednesday/Friday    Tuesday/Thursday

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

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

**FULL DAY:** Monday through Friday    **HALF DAY:** Monday through Friday

**EXTENDED CARE:** Monday through Friday

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

Enrollment fee: \$50 per child

Please return your completed Enrollment Form to the Preschool office with a check or save and send via email to [erondeau@saintthomaswaterford.org](mailto:erondeau@saintthomaswaterford.org) if you choose to pay online.

The Enrollment Fee can be paid using our online payment system.

**I Paid Online**

**VIEW ONLINE PAY INSTRUCTIONS | MAKE AN ONLINE PAYMENT**

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