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| Jesus said, “Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these.” Matthew 19:14  |

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| School Use Only Amount received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |

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**Pre -K / 5-day weekly program Registration 2021/2022**

Registration fee for all students is $75.00 per child (non-refundable), there is a 10% discount on the monthly tuition for any additional children in the family (10% off the lowest rate). Registration fee and first month’s tuition are required with this form. Checks or money orders are requested for this payment and thereafter you will be required to sign up for Tuition Express.

**Please circle which program you are registering for.**

Pre- K Monday- Friday 8:30 am - 11:45 pm $408.00 monthly

Pre- K After Care 11:45 am – 6:00 pm $520.00 monthly (set fee no matter how many days child attends)

If your child is not potty trained there will be an additional fee of $24.00 monthly

Pre-K classes follow the AACPS calendar for closings.

Am Pre-K: AM snacks will be provided by the guardian.

Pre- K After Care: lunch and pm snack will be provided by the guardian.

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M/F \_\_\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_

Mother’s Name or Legal Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother or Legal Guardian’s email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name or Legal Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father or Legal Guardian’s Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

4760 Mt. Road, Pasadena, Md 21122 Phone (410) 255-2429

Dawn M Rey, Director mtcarmelcdc2@gmail.com