|  |  |  |  |
| --- | --- | --- | --- |
| |  | | --- | | 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 | | |  | | --- | | School Use Only  Amount received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   Logo, company name  Description automatically generated |

The registration fee for all students will be $100.00 per child if the payment is received before February 27th, if received after February 27th the registration fee will be $125.00 per child. The registration fee is non-refundable! There will be a 10% discount on the monthly tuition for any additional children in the family (10% off the lowest rate) registration and 1st month’s tuition must be accompanied with this form for your child/ren to be added to the class of your choice for the Fall program. Checks or money orders are required for this first payment and thereafter you will be required to sign up for Tuition Express.

**Pre -K / 5-day weekly program Registration 2023/2024 - (All students must be potty trained, and all snacks and lunches are provided by the child’s guardian.)**

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

Pre- K Monday - Friday 9:00 am - 12:15 pm $459.00 monthly

Pre-K classes follow the Anne Arundel County Public Schools (AACPS) calendar for closings.

Please complete all information on this form.

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dawn M. Rey, Director mtcarmelcdc2@gmail.com

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