



**Pre-K Application 2024-2025**  
**1600 Union Avenue**  
**Fairfield, CA 94533**

**Please return this application with your non-refundable \$150.00 registration fee.**

**Child's Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Parent/Guardian's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mothers Cell Phone:** \_\_\_\_\_ **Fathers Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Preschool Classes**

**Tues/Thurs: \$280.00/month** \_\_\_\_\_ **Mon/Wed/Fri: \$360.00/month** \_\_\_\_\_

**Monday – Friday: \$640.00/month** \_\_\_\_\_

1. Tuition fees are for nine months, September through May. We do not offer fee reductions for short months, vacations, illnesses, or school closures. Payment not received by the 7<sup>th</sup> of each month will accrue a \$5.00/day late fee. If tuition is not received by the 15th day of the month, your child may not return to school until payment is made in full. There is a \$30.00 charge for returned checks. We enforce a late pick-up fee of \$20.00 for the first 15 minutes and \$1.00 per minute thereafter. Three documented late pick-ups within 30 days may result in a termination of enrollment. We require thirty (30) days written notice of intent to withdraw from the school. We charge a one month tuition fee in lieu of aforementioned notice.

I agree to the previous terms (initial): \_\_\_\_\_

2. I give St. Mark's Preschool permission to photograph and post my child's picture on the St. Mark's Preschool website or on advertising materials. Your child's name will not be posted.

I agree to the previous terms (initial): \_\_\_\_\_

3. I understand my child must be fully potty trained (manages all aspects of toileting needs independently – no Pull-Ups) to attend preschool.

I agree to the previous terms (initial): \_\_\_\_\_

\_\_\_\_\_  
**Parent/Guardian Signature**

**Thank you for choosing St. Mark's Preschool!**

**Additional Information:**

How did you hear about St. Mark's Preschool? Social Media \_\_\_ Holy Spirit \_\_\_ Returning Student \_\_\_  
Referral \_\_\_ (if so, whom may we thank?) \_\_\_\_\_ Other \_\_\_\_\_

What made you choose St. Mark's Preschool for your child? \_\_\_\_\_

**Office Use:**

Date Registration Fee Paid \_\_\_\_\_ Check/Cash \_\_\_\_\_ Check # \_\_\_\_\_

Director Signature \_\_\_\_\_

Mission Statement: St. Mark's Preschool exists so that children in our community will know and experience God's love through creative opportunities that broaden their skills in all areas of development.