



Preschool 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: \$270.00/month _____ **Mon/Wed/Fri: \$350.00/month** _____

Monday – Friday: \$620.00/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 7th 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.