



Saint Bernadette Early Childhood Academy 2018-2019 Application

HOUSEHOLD INFO:

Family Surname: _____ Student Surname if Different: _____
Street Address: _____ Mailing Address if Different: _____
City: _____ Zip Code: _____ City: _____ Zip Code: _____
Primary Phone Number: _____ Land Line Cell (Whose? _____)
Parish Affiliation: _____ Envelope # _____

Father's Information:

Name: _____
Address: _____
City: _____ Zip: _____
Email: _____
Cell Phone: _____
Occupation: _____
Employer: _____
Employer Phone: _____
Marital Status: _____

Mother's Information:

Name: _____
Address: _____
City: _____ Zip: _____
Email: _____
Cell Phone: _____
Occupation: _____
Employer: _____
Employer Phone: _____
Marital Status: _____

Guardian's Information:

Name: _____
Address: _____
City: _____ Zip: _____
Email: _____
Cell Phone: _____
Occupation: _____
Employer: _____
Employer Phone: _____
Marital Status: _____

Student Information:

Full Name: _____ Nickname: _____
Street Address: _____ City: _____ Zip Code: _____
Birthdate: ____/____/____ Birthplace: _____ Gender: _____
Religion: _____ Ethnicity: _____
Previous School/Daycare Experience: _____
Other Information to be Noted: _____

Fees and Billing Information

Registration Fee: \$100 Due With Registration Form

Student is not considered registered without a completed form and payment of this fee.
Amount paid will be applied to first month's tuition.

Paid
Date: _____
Initials: _____

Program Level:

PK 3 PK 4 PK4 Plus

Program Use:

- | | | | |
|---|-----|-----------------|----------------------------------|
| <input type="checkbox"/> 3 Days, Half Day | MWF | 9 AM - 11:30 AM | \$2,200 annually / \$220 monthly |
| <input type="checkbox"/> 5 Days, Half Day | M-F | 9 AM - 11:30 AM | \$3,000 annually / \$300 monthly |
| <input type="checkbox"/> 3 Days, Full Day | MWF | 9 AM - 2 PM | \$2,700 annually / \$270 monthly |
| <input type="checkbox"/> 5 Days, Full Day | M-F | 9 AM - 2 PM | \$3,700 annually / \$370 monthly |

Before and After School Program:

Not interested Enroll as indicated below:

Before School (7:30 - 9 AM)

- 1 Day - \$60/month
- 2 Days - \$105/month
- 3 Days - \$120/month
- 4 Days - \$135/month
- 5 Days - \$150/month

After School (2 - 5 PM)

- 1 Day - \$110/month
- 2 Days - \$200/month
- 3 Days - \$215/month
- 4 Days - \$235/month
- 5 Days - \$250/month

Before & After School

- 1 Day - \$140/month
- 2 Days - \$260/month
- 3 Days - \$290/month
- 4 Days - \$310/month
- 5 Days - \$330/month

Frequency of Payment:

- One Annual Payment (10% savings) Due August 10, 2018
- Two Semi Annual Payments Due August 10, 2018, and January 10, 2019
- Ten Monthly Payments Due 10th of each month beginning August 10, 2018

Method of Payment: (Note: We do not accept payment by credit card.)

- Check , Cash or Money Order Electronic Funds Transfer

Your tuition can be electronically withdrawn on the first business day after the second Sunday of each month. You will need to complete a contract and submit a cancelled check.

Billing Preference:

- Regular Mail to Family Address
- Email Use this email address: _____
- Mail to a different individual/address: _____

Financial Agreement:

I am the person financially responsible to pay my family's tuition by the tenth of each month. Thereafter a \$15 late fee will be applied each month that it is overdue.

Signature of Person Financially Responsible: _____ **Date:** _____