



**Application Form 2019-2020 School Year
Preschool age Children 2.9 - 3.11 year old (by 9/1/2019)**

Please indicate your preference by circling the days of your choice.

8:30am-12:30 pm	1 st Choice	Monthly Tuition
5 Days	M, T, W, Th, F	\$ 745.00
3 Days	M - W - F	\$ 520.00
2 Days	T - Th	\$ 385.00
8:30am-3pm	1st Choice of Days	Monthly Tuition
5 Days	M, T, W, Th, F	\$ 1,265.00
3 Days	M - W - F	\$ 843.00
2 Days	T - Th	\$ 626.00

Pre-Kindergarten age Children 4-5years old

Please indicate your preference by circling the days of your choice.

8:30am-12:30pm	1 st Choice	Monthly Tuition
5 Days	M, T, W, Th, F	\$ 745.00
3 Days	M, W, F	\$ 520.00
8:30am-3pm	1st Choice of Days	Monthly Tuition
5 Days	M, T, W, Th, F	\$ 1,265.00
3 Days	M, W, F	\$ 843.00

Options

<u>Early drop off option</u>	<u>Lunch option</u>	<u>Afternoon option</u>
8:00am-8:30am	12:30pm-1:00pm	12:30-3:00
\$10.00 per day	\$10.00 per day	\$25.00 per day



Child's first name: _____ Middle _____ Last _____

Sex: _____ Date of Birth: _____

Home Address: _____ Town _____ Zip _____

Home Telephone#: _____ Requested Start date (if other than September) _____

Father's name: _____ Mother's name: _____

Father's Cell: _____ Email: _____

Mother's cell: _____ Email: _____

Name of sibling (s) attending "Little Halos" in September: _____

Name of sibling (s) who previously attended "Little Halos": _____

Name Day date: _____ Patron Saint: _____

- \$ 50.00 non-refundable application fee per child must accompany this application.
- Checks are made out to Saint Athanasius the Great/Little Halos.
- Your child is accepted if the office has your application and registration fee and you will be notified by mail.

Signature of Parent/ Guardian: _____ Date: _____

For office use only:

Program: **Half Day 8:30-12:30**(2 days) (3 days) or (5 days) or **Full Day 8:30-3:00pm** (2 days) (3 days) or (5 days)

__ \$ 50.00 non-refundable application fee

Date received: _____ Age as of 9/1/ 2019, _____ Check #: _____