Marin Formative Christian Preschool 2010-2011 Registration

Please complete this form and return it to school along with a non-refundable registration fee of $100.00. Materials fee of $100.00 will be collected during the first week of school.

Morning Session Tuition Rates 8:45 to 11:45

Please check your group and circle your choice of days.

_____AM Pre-K	3-day	Monday Wednesday Friday or Tuesday Wednesday Thursday	$460.00
	5-day	Monday thru Friday	$600.00
_____Koalas	2-day	Tuesday Thursday	$300.00
	3-day	Monday Wednesday Friday	$460.00
	5-day	Monday thru Friday	$600.00
_____Teddy Bears	2-day	Tuesday Thursday	$300.00
	3-day	Monday Wednesday Friday	$460.00
	5-day	Monday thru Friday	$600.00

Note: Diapering fee of $25.00 for Part-Time and $50.00 for Full-Time will be added to tuition

4-day available for all groups Monday Tuesday Weds Thursday Friday $530.00

Afternoon Pre-K Tuition 12:45 to 3:00

_____PM Pre-K	4-day	Monday thru Thursday	$460.00
_____Full Time		Includes both AM/PM Pre-K, Lunch time and all extended care.	$1220.00

Part-time for morning and afternoon combinations may be available, see program director.

Extended Care and Lunch Bunch Rates $9.00 per hour

Extended care is available before 8:45 and after 11:45
Extended care is also available proceeding the afternoon pre-k session
Lunch Bunch is offered from 11:45 to 12:45

Note: Advance sign-up is required to secure child's space @ $9.00 per hour.
Otherwise prior approval is required and space permitting for Drop in @ $11.00 per hour.

_____My child will attend extended care
from_____to_____in the morning (7:00 to 8:45)
from_____to _____in the afternoon (11:45 to 6:00)
Mon_____Tues_____Weds_____Thurs_____Fri_____
_____My child will nap from 12:45 to 2:45

_____Full-time discounted rates for 5-day =$1100.00 4-day=$1000.00 3 day=$900.00 2 day =$800.00.
This includes the morning session, lunch time and all extended care before and after.
_____10% Sibling Discount on Tuition only

Child's Name:_____Child's Birthday:_____
Parents: Father_____Mother_____
Address: _____City_____Zip Code_____
Telephone: Home:_____Cell(s)_____Work_____

Parent Signature_____ Date_____
Administrative Approval _____Date_____