

Date Received \_\_\_\_\_

Check Number \_\_\_\_\_

**Enrichment Preschool Registration** 

2270 E. Stadium Blvd. Ann Arbor, MI 48104 734-821-2290 **2017-2018** 

# FAMILY INFORMATION (PLEASE PRINT)

# \*\*\*Please note: Children attending the 3s program, must be three (3) by Dec 1<sup>st</sup>. Children attending the 4s program, must be four (4) by Dec 1<sup>st</sup>

	3s_	OR	4s			
Child's Name:	Last	First	Gender	D.O.B		
Child's Name:	Last	First	Gender	D.O.B		
Mother's Name		Father	's Name			
Address		Addres	ss (if different)			
City	Zip	City		Zip		
Phone (H)	(W)	Phone	(H) (V	N)		
Cell Phone		Cell Ph	one			
Email:		Email:				
***If you are NOT a current SFA school family, both Parents' Social Security numbers are required. If you are a current SFA School family, please leave blank***						
SSI#		SSI# _				
Are you a curre	nt St. Francis School fan	nily?Are	you a returning prescl	hool family?		
Are you a practi	cing Catholic? I	f so, to which par	ish/church do you be	long?		
Does your child	have any known allergi	es?				

Child's Ethnic Group:	Hispanic or Latino	Non-Hispanic or Latino
Child's Race (Choose one or more):	Native American/Alaskan Asian	
	Black American/African	White
	Native Hawaiian/Pacific Islander	

## **TUITION & REGISTRATION**

#### **TUITION:**

3's Program \$1080/year \$120/month

4's Program \$1620/year \$180/month

#### **REGISTRATION:**

St. Francis School and Parish families receive priority placement over out-of-parish families.

There is a non-refundable registration fee of \$50 which must accompany this registration form. Please make your check payable to *St. Francis ESP*.

## The Enrichment Preschool registration fee is \$50 per child.

Please contact the Child Care Director, Christina Busse at 734-821-2290 if you have any questions.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_