ST. JOHN'S EARLY LEARNING CENTER 2022-2023 Waitlist Form

Date:	Child's Name:			Clas	Class:	
	Date of Birth:	Ge	ender:	Star	rt Date:	
Billing Info	ormation for Financi	ally Responsible	Parent:			
Last Name	ə:		First Name:			
Address:					Phone:	
					ail:	
	TUITION WILL BE IN ircle one option~	VOICED IN EQUA	L 12 MONTH	INSTALL	MENTS AS FOLLOWS:	
		Toddler 1	Tode	dler 2	Preschool/Pre-K	
2 Day Opt	ion (T/Th)	\$825	\$	805	\$670	
3 Day Option (M/W/F)		\$1,240	\$1,200		\$1,010	
5 Day Opt	ion (M-F)	\$1,625	\$1	,605	\$1,340	
registratio		a web link to crea	ate a Smart	Tuition acc	nart Tuition fee. At the time of count and pay your Registration is done.	
					email from TADS asking you to complete until this is done.	
understood before any for emerge medical inf	d that every effort will I action will be taken. I ency care regarding m	be made to locate The people listed a y child, unless othe y child with teach	family/guardi as emergency erwise specifi	ans/persons contacts a ed. I give S	ild, should an emergency arise. It is is listed as emergency contacts re also authorized to give consent t. John's permission to share o are responsible for my child's	
Parent or le	egal guardian signatur	e:			Date:	