

Enrollment Application

Child's Name		
First	Middle	Last
Address		
Street	Town	Zip Code
Home Phone Number	Date of Birth	Gender: M/F
Email address(s) to receive school	information	
Parent/Guardian's Name	Cell Number	
Occupation	Employer	
Work Phone	Business Address	
Parent/Guardian's Name	Cell Number	
Occupation	Employer	
Work Phone	Business Address	
Parent/Guardian Relationship-Pleas	se circle: Married Divorced Separated S	Single Remarried Widowed
IF CUSTODY IS	SSUES EXIST PLEASE FILL OUT TH	HE BOX BELOW:
Custody Status		
Custodial Rights: Name(s):LEGAL CUSTODY of this child.	Relationship(s):_	has/have
The other parent/guardian May/ N	May Not have contact with the child and	d/or sign the child out of school.
Legal documents explaining the al	bove circumstances must be provided to	Good Day Preschool.
List child's behavioral, educational	, or medical needs including allergies or o	dietry restrictions:
Does your child require an EpiPen? along with an allergy action plan.)	YesNo(If yes, a copy of	doctor's orders must be submitted
For informational purposes-list med	dications child is taking including time/do	ose:

Pediatrician name:				
Phone number:	Address	:		
Siblings (Names and ages)				
How did you learn about Goo	d Day?			
Has your child attended school	ol before? If	so, where?		
Primary language spoken at he	ome:			
Age of child as of September	2024:			
Please mark with an X the co	lass you desire:			
Full Day Toddler	Preschool Pre	Kindergarten	Kindergarten	
**Half Day Students-Please	mark with an X which	session:		
1st choice	2^{nd} choice			
Mon./Wed./Fri. morning	Mon./Wed./	Fri. morning		
Mon./Wed./Fri. afternoon	Mon./Wed./	Fri. afternoon		
Tues./Thurs. morning		morning		
Tues./Thurs. afternoon	Tues./Thurs	. afternoon		
Will you need before or after	r care? If so, please wri	ite the hours belo	w between 7:15am-5pm:	
MondayTuesday_	Wednesday_	Thursda	ay Friday	
Full Day Students- Please m	ark days desired with a	check:		
Monday Tuesday	Wednesday	Thursday	Friday	
Full Day Preschool Students only: Does your child nap? Yes/No				
List 2 local emergency conta not picked up on time:	cts if parents can't be	reached in the ev	ent of an emergency or if a chil	d is
	an parent/guardian autho	orized to pick up o	shild:	
Home Phone Number	Work		Cell	
Address				
2. Name of person(s) other tha	n parent/guardian autho	orized to pick up c	hild:	
Home Phone Number	Work		Cell	
Address				
Relationship				

Good Day Preschool and Kindergarten, LLC

Child's Name:	Monthly Tuition Amount:
The following contract exists between	
Preschool and Kindergarten.	(Your Name)
DUE WHEN A CHILD IS ENROLL	ED:
*	ther student can be placed in his/her class within 30 e refunded. However, registration fees are NON
I AGREE:	
1. To supply my child's medical for	m and immunization record by the first day of school.
2. To pay tuition by the 10 th of each previously arranged with Miss Amy	month. A late charge of 10% applies thereafter unless
3. That there are no tuition discount weather.	es for illness or vacations; (yours or ours), or inclement
school is in session. I understand the	ach of the ten months, (September-June), in which at I am committed to a yearly tuition divided into 10 hat school vacations are considered in the annual for days off.
	% plus a maximum fee of \$2
2 2	the check is ever returned by my bank for insufficient by the \$35.00 fee for a returned check.

Parent's Signature

Date

FOR OFFICE USE ONLY:

Date of Application		
Security Deposit	Registration Fee	_
Monthly payments:	-	
September	October	
November	December	
January	February	
March	April	
May	June	
If payment is by semester:		
First Semester Payment:	Second Semester Payment:	
Class placement	Date:	
Student enrolled by:		

Tuition fees for school year 2024-2025

All tuition is paid on a monthly basis and is due by the 10^{th} of each month. Tuition payments may be made by cash, check, Venmo, bank transfer (ACH) or credit card/debit card. A discount for families with multiple children attending concurrently is available. Note: See contract page for processing fees.

TODDLER PROGRAM (18 months-2½ years old)		
7:15 am-5 pm Five Days \$1356.00	8:30 am-3 pm Five Days \$1102.00	
Four Days \$1199.00	Four Days \$905.00	
Three Days \$1003.00	Three Days \$841.00	
Two Days \$832.00	Two Days \$675.00	

PRE-SCHOOL PROGRAM (2 \frac{1}{2} & 3-year-olds)

Monday-Friday (Five Half Days) am or pm- \$622.00

Mon/Wed/Fri (Three Half Days) 8:45am-11:15 am or 12:30pm-3:00 pm- \$356.00

Tues/Thurs (Two Half Days) 8:45am-11:15 am or 12:30pm-3:00pm- \$265.00

Full day 8:30am-3:00pm SEE BELOW Extended day 7:15am-5:00pm SEE BELOW

PRE-KINDERGARTEN PROGRAM (4 & 5 year olds)

Monday-Friday (Five Half Days) am or pm \$667.00

Mon/Wed/Fri (Three Half Days) 8:45-11:45am or 12:30-3:30pm \$390.00

Tues/Thurs (Two Half Days) 8:45-11:45am or 12:30-3:30pm \$280.00

Full day Monday- Friday 8:30am -3:30pm SEE BELOW Extended Monday- Friday day 7:15am -5:00pm SEE BELOW

FULL DAY STUDENTS (2 $\frac{1}{2}$ - 5 years old) 7:15am-5pm

Preschool or Pre-K 7:15am-5pm Five Days \$1157.00	Preschool 8:30am-3pm Five Days \$1003.00	Pre-Kindergarten 8:30am-3:30pm Five Days \$1035.00
Four Days \$1016.00	Four Days \$873.00	Four Days \$903.00
Three Days \$854.00	Three Days \$708.00	Three Days \$731.00
Two Days \$656.00	Two Days \$554.00	Two Days \$571.00

FULL DAY KINDERGARTEN

Monday-Friday 8:30am-3:00pm \$938.00

Monday-Friday 7:15am-5:00pm \$1102.00

A completed application and non-refundable \$50 registration fee (which includes mandatory accident insurance) must be sent along with one month's tuition to secure your child's place for the school year. The month's tuition will be applied to June's tuition. If a child then needs to withdraw, and another student can be placed in his/her class within 30 days, the June tuition payment will be refunded.