

St. Timothy's Preschool
2094 Grant Road
Mountain View, CA 94040
(650) 967-4724

This is the Registration Form for St. Timothy's Preschool. Please fill out this form and return it with the Registration, Enrollment and Insurance fees. These fees hold a place for your child in this class.

The Registration fee is the pre-payment of June's monthly tuition. The Enrollment fee is a processing fee. The Insurance fee covers your child during Preschool hours. **All fees are non-refundable.**

REGISTRATION FORM FOR ST. TIMOTHY'S PRESCHOOL

Child's Name _____ Birthdate _____

Child's Nickname _____

Please enroll my child in the: Monthly Tuition

Tuesday-Thursday A.M. 3s class _____

Monday-Wednesday-Friday A.M. 4s class _____

Tuesday-Thursday P.M. Science 4s class _____

Enclosed is:

Registration fee _____ (June's tuition prepaid)

Enrollment fee _____

Insurance fee _____

Total _____ **ALL FEES ARE NON-REFUNDABLE**

I have read the notes on financial matters, and I agree with these policies.

Date _____ Mother's and Father's Names _____

Parent's Signature _____

Address _____

Telephone () _____ Cell () _____

E-mail _____

OFFICE USE ONLY