

6135 Rings Rd., Dublin, OH 43016

2022-2023 APPLICATION INFORMATION All class options meet Monday – Friday.

1.	Please provide the following application form and fee below to apply: Non-refundable check for registration/supply fee:			
	Mornings only	9:00 AM – 12:00 PM	\$175	
	Mornings+ (with Lunch Bunch)	9:00 AM – 1:00 PM	\$175	
	Full Days	9:00 AM – 3:00 PM	\$200	
Please make check payable to: St. John Christian Kindergarten				
	Check for registration/supply fee will be returned if you are put on a waiting list			

Check for registration/supply fee will be returned if you are put on a waiting list.

- 2. Children must be five years old by September 30, 2022 to apply.
- 3. Tuition information for the 2022-2023 kindergarten year:

Morning Kindergarten 9:00 AM – 12:00 PM	\$3800 Payable in 10 installments of \$380
Morning Kindergarten Plus 9:00 AM – 1:00 PM Includes Lunch Bunch	\$4200 Payable in 10 installments of \$420
Full Day Kindergarten 9:00 AM – 3:00 PM	\$5400 Payable in 10 installments of \$540

- 4. Tuition is paid through Tuition Express. You will receive details about this service in the spring forms packet.
- 5. Families with more than one child enrolled at St. John Christian Preschool and Kindergarten pay full tuition for the oldest enrolled child, then receive a 10% discount on all other children from that family who are enrolled in the same year.

Please direct questions concerning forms, procedures, or the preschool to Bonnie Stottlemyer at 614-889-5893 or kindergarten@stjohndublin.org. We look forward to serving you!

1/24/2022

St. John Christian Kindergarten 6135 Rings Rd., Dublin, OH 43016 614-889-5893

2022-2023 APPLICATION/REGISTRATION FORM

Child's name:					
Last Name			First Name		
Name for class list, charts, e	etc				
Birthdate:		Воу	Girl		
Child's primary language:					
Parent/Guardian #1:	Last Name		First Name		
Relationship to child:					
Cell phone number:					
Parent/Guardian #2:	Last Name		First Name		
elationship to child:					
Cell phone number:					
Address: Street		City	Zip		
Best email address for school	ol communication: _				
lames and birth dates of ot	her children in the h	ousehold:			
·	DOB	4	DOB		
2	DOB	5	DOB		
3	DOB	6	DOB		
amily church home:					
Allergies or other medical co	oncerns:				
		10 · · · · · ·			

Dietary restrictions, including those for medical, religious, or cultural reasons:

CLASS PREFERENCE

	Morning Kindergarten 9:00 AM – 12:00 PM	\$3800	Payable in 10 installments of \$380		
	Morning Kindergarten Plus 9:00 AM – 1:00 PM Includes Lunch Bunch	\$4200	Payable in 10 installments of \$420		
	Full Day Kindergarten	\$5400	Payable in 10 installments of \$540		
Comments:					
Signatı	ure of parent, custodian, or guardian		Date		

St. John Christian Preschool and kindergarten admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

Date form received _____

ST. JOHN CHRISTIAN KINDERGARTEN TUITION AGREEMENT - SCHOOL YEAR 2022-2023

For the enrollment of _____

(Last Name)

(First Name)

- 1. I understand that the registration fee paid with the registration form is non-refundable unless my child is put on a waiting list.
- 2. I agree that I am responsible for my child's tuition as listed below.

Morning Kindergarten 9:00 AM – 12:00 PM	\$3800 Payable in 10 installments of \$380
Morning Kindergarten Plus 9:00 AM – 1:00 PM Includes Lunch Bunch	\$4200 Payable in 10 installments of \$420
Full Day Kindergarten	\$5400 Payable in 10 installments of \$540

- 3. **I understand that for ease of payment and collection**, the total tuition for the year is divided into 10 equal payments.
- I understand that full tuition is required regardless of vacations, illness, or emergency school closings. If my child leaves for an extended trip, I understand I am required to pay tuition during my child's absence.
- I agree to pay monthly payments from August through May.
 Tuition payments will be processed on the first Monday of each month.
- 6. All tuition payments will be made through the Tuition Express Program. A form to provide the necessary information for this payment program will be included in the forms packet sent to me in May. I will return the form by July 1 with the other required forms.
- 7. If an auto-payment is declined by our bank, we will inform the school immediately with new account information or discuss options with the school.
- 8. I will receive financial assistance information as it becomes available.

Parent Signature	Date			
Registration/supply Fee	Check #	Received By	Date	

1/24/2022