

# St. Paul Early Childhood Center

## Admission Application

School Year 2024-2025

**Application for Admission & Commitment fee MUST accompany this form to ensure your child's place in the school.**

Student's Name: \_\_\_\_\_ Gender: F M Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Preschool sessions meet 9:00-11:30am

\_\_\_\_ 2 Day T/TH \_\_\_\_ 3 Day M/W/F/ \_\_\_\_ 5 Day M-F

Enrichment plus meets 11:30-12:30 \_\_\_\_\_ 3 Day M/ W/ F (Must be enrolled in enrichment)

\_\_\_\_ Enrichment Class meets M/W/F 12:30-3:45 (Must be 4 by September 15, 2024)

### Parent Information

Father's name: \_\_\_\_\_ Mother's name: \_\_\_\_\_

Residence Phone: \_\_\_\_\_

Residence Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Employed By: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell#: \_\_\_\_\_ Email address: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Employed By: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell#: \_\_\_\_\_ Email address: \_\_\_\_\_

If parents are divorced or separated, please list name/address to whom communication should be sent.

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## Church Information

Are you a member of a Christian Church? \_\_\_\_ Yes \_\_\_\_ No

Name of Church:

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## Preschool Information

Required for enrollment: Must be at least 3 years old, toilet trained and not enrolled in kindergarten at time of enrollment.

How did you learn about us?

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Upon receipt of this application and the fee listed below, we will place your child's name on the enrollment list. In July we will send you a packet containing additional enrollment materials that will be necessary to complete your child's enrollment process. Make checks payable to: St Paul Early Childhood Center

Send To: St. Paul Early Childhood Center  
7960 State Route 38  
Milford Center, Ohio 43045

I understand that this preschool does not have diapering facilities.

I have enclosed a **non-refundable** commitment fee of \$200. This fee will not be applied to tuition.

I do **NOT** need Latchkey Services \_\_\_\_\_

I **DO** need **Before-school** Latchkey Services on M/W/F \_\_\_\_\_

I **DO** need **Before-school** Latchkey Services on T/TH \_\_\_\_\_

I **DO** need **After-school** Latchkey Services on T/TH (only) \_\_\_\_\_

(Available 7:30-9:00 am M/T/W/TH/F

11:30-12:30 T/TH)

Signature of Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_