



## ST. ALBAN'S PRE-SCHOOL

1 Church Lane, Oakland, NJ 07436

201-337-5928 \* FAX 201-651-9486

### MARK YOUR CALENDARS

**Registration for the 2017/2018 school year begins on  
Wednesday, January 25<sup>th</sup>, at 9 AM.**

Registration is on a first come, first serve basis.

- ❖ The registration/insurance fee for the 2017/2018 school year will be \$75.00 for currently enrolled students, siblings and alumni. The registration/insurance fee for new students is \$100.00.
- ❖ You will be required to fill out the attached form, choose your child's schedule and attach a check for the non-refundable \$250.00 deposit and the non-refundable registration/insurance fee. These fees will allow us to process your application. Attached are the application form and tuition fees.
- ❖ **Please be sure to tell your friends that Registration will open to the public on Friday, January 27<sup>th</sup> at 9 am.** We truly appreciate the referrals that you make to our pre-school. The best advertisement is a happy family!

In order to provide the best age appropriate education, children will be admitted to classes according to the following cut-off dates:

- 1's class - Must be 1 to start the program
- 2's class - Must be 2 to start program
- 3's class - Must be 3 by October 31
- 4's class - Must be 4 by October 31
- TK class - Must be 5 by December 31

The director and faculty reserve the right to evaluate and recommend placements that deviate from the above policy.

### NEW SPECIALIST SCHEDULE STARTING SEPTEMBER 2017

<b>MONDAY</b>	AM & PM	<b><i>Science &amp; social Studies</i></b>
<b>TUESDAY</b>	AM & PM	<b><i>Cooking</i></b>
<b>WEDNESDAY</b>	AM & PM	<b><i>Read &amp; Create</i></b>
<b>THURSDAY</b>	AM & PM	<b><i>Music &amp; Creative Movement</i></b>
<b>FRIDAY</b>	AM & PM	<b><i>Physical Education</i></b>

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1 Church Lane, Oakland, NJ 07436  
(201) 337 – 5928 \* FAX (201) 651 - 9486

**APPLICATION FOR ADMISSION**

Child's Name \_\_\_\_\_ Boy  Girl  Birth Date \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

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

Preferred E-Mail Contact \_\_\_\_\_

Class:            1's ( )                      2's ( )                      3's ( )                      4's ( )                      TK ( )

<b>CARE CLUB:</b> (circle)	Mon.	<b>FULL DAYS:</b> (circle)	Mon.	<b>HALF DAYS:</b> (circle)	Mon.	AM	PM	
	Tue.		Tue.		Tue.	AM	PM	
	Wed.		Wed.		Wed.	AM	PM	
	Thu.		Thu.		AM: 9-12	Thu.	AM	PM
	Fri.		Fri.		PM: 1-4	Fri.	AM	PM

How did you learn about St. Alban's Pre-School? \_\_\_\_\_

**For Emergency Contact** (If parents cannot be reached):

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**FAMILY INFORMATION**

Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Father's Home Address \_\_\_\_\_

Father's Occupation & Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Mother's Home Address \_\_\_\_\_

Mother's Occupation & Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

**Other Children in the Family**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

I have read and received a copy of the "Information to Parents" statement prepared by the Office of Licensing – Youth and Family Services in the Department of Human Services and the "General Information Letter" and "Expulsion Policy" of St. Alban's Pre-School.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent's Signature)

Pre-Enrollment Conference Date \_\_\_\_\_



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### 2017-2018 School Year

#### TUITION FEES (monthly, September to June)

	No. of Days	3's, 4's & TK	1's & 2's	School day & Care Club (7am – 6pm)
<b>Half Days</b> (9 AM – 12 NOON)	2	\$ 320.00	\$ 340.00	
	3	365.00	395.00	
	4	435.00	460.00	
	5	510.00	545.00	
<b>Half Days</b> (1 PM --- 4 PM)	2	\$ 285.00	\$ N/A	
	3	330.00	370.00	
	4	390.00	430.00	
	5	460.00	510.00	
<b>Full Days</b> (9 AM – 4 PM)	2	\$ 465.00	\$ 500.00	N/A
	3	670.00	725.00	\$ 895.00
	4	815.00	880.00	1060.00
	5	945.00	1020.00	1170.00

**Students in the 3's and 4's must attend a minimum of 3 Half Days and students in the Transitional Kindergarten must attend a minimum of 5 half days.**

**Additional hours added on an *as needed* basis are \$9.25 per hour.**

#### REGULAR SCHOOL FEES

Returning Student Registration/Insurance Fee – \$75.00  
New Student Registration/Insurance Fee -- \$100.00  
First Month Tuition Deposit -- \$250.00

**Your non-refundable registration fee and non-refundable deposit of \$250.00 are due when you register your child for the 2017-2018 school year.**

#### CURRICULUM BOOK FEES

3-Year Old Class - \$10.00

4-Year-Old Class - \$40.00

Transitional Kindergarten - \$110.00