



St. Catherine
Early Childhood Education Center
Enrollment Choice/Tuition Contract
2021-2022



Student Name _____

How did you hear about us? _____

1. Check category your child will be in as of September 30th, 2021

Preschool	___ 3 years old	___ 4 years old but not attending Kindergarten 2022	
Pre-K	___ 4 years old and attending Kindergarten in 2022	___ 5 years old	

2. Select Half or Full Day Options

Half Day Options 8 AM-11 AM

Tuition is a set price for the year. Payments are split equally from August-May ___ Initial

I will be contracting for ___ half days of school. My child will attend (please ck) M T W R F

	Preschool	Pre-K (Attending Kindergarten in fall of 2021)
2 Half Days	\$155	Not Available
3 Half Days	\$215	Not Available
4 Half Days	\$260	Not Available
5 Half Days	\$300	\$300

Full Day Options 8 AM-3 PM

Tuition is a set price for the year. Payments are split equally from August-May. ___ Initial

I will be contracting for ___ full days of school. My child will attend (please ck) M T W R F

	Preschool	Pre-K (Attending Kindergarten in fall of 2021)
2 Full Days	\$235	Not Available
3 Full Days	\$320	\$320
4 Full Days	\$390	\$390
5 Full Days	\$445	\$445

3. Please indicate the form of payment for registration fee, TSG fee, and tuition. Check all that apply.

Private pay, \$100 registration fee and \$17 TSG fee

I am applying for an Early Childhood Grant*. Registration fee varies

My child(ren) are already approved for publicly funded childcare benefits

I am applying for publicly funded childcare benefits

*Students must live in Ohio, be 4 as of 10/1/21 and family must be at or below the 200% federal poverty guidelines.

4 Please indicate the active parishioner scholarships that you will be applying for.

Most Blessed Sacrament Active Parishioner Scholarship

Regina Coeli Active Parishioner Scholarship

St. Catherine Active Parishioner Scholarship

St. Clement Active Parishioner Scholarship

St. John the Baptist Active Parishioner Scholarship

St. Michael the Archangel Toledo Active Parishioner Scholarship

5 Please indicate the method of payment for tuition.

Payment in full

Tuition Express - automatic withdrawal (credit card, checking, savings)

Other _____

I acknowledge that tuition must be kept current or my child may lose his/her enrollment spot at St. Catherine Early Childhood Education Center. I acknowledge that the St. Catherine Early Childhood Education Center operates on a school year calendar. **No credit will be offered for absences due to illness or inclement weather.** *I recognize that my monthly payment amount may change if I do not make timely payments or if my monthly payments are paid in advance.

I have read the tuition contract and agree to pay the required tuition fees.

Signature

Date

I acknowledge that if my child utilizes the Extended Day program, this service is billed separately at a rate of \$5 per hour used. I agree to keep current on any charges accrued to this account or risk not being able to utilize this service or possibly being dismissed from the school. I acknowledge that the Extended Day program closes at 6 PM. It is my responsibility to pick my child(ren) up by this time. Any late pick up will be billed at \$1 per minute after 6 PM.

Signature

Date

Those utilizing the benefits of Publicly Funded Child Care please read and sign below

I acknowledge that it is my responsibility to accurately record my child's attendance according to the method being utilized by LCJFS. I acknowledge that if I fail to record my child's attendance accurately and in a timely manner, I will be required to pay for the time used under the private pay rates. I further agree to pay any weekly required copayments set by LCJFS to St. Catherine Early Childhood Education Center by the end of each week. I agree that I am required to private pay any charges accrued due to late Extended Day pick up or failure to log for regular time used.

Signature

Date