



**St. Catherine
Early Childhood Education Center
Enrollment Choice/Tuition Contract
2024-2025**



Student Name _____

How did you hear about us? _____

Registration Fee \$100 Teaching Strategies Gold Fee \$20

1. Check category your child will be in as of September 30th, 2024

___ Preschool 3 years old OR 4 years old but **not** attending Kindergarten in fall 2025

___ Pre-K 4 years old **and** attending Kindergarten in 2025 OR 5 years old

2. Select Half or Full Day Option

Half Day Options (8 AM-11 AM)
Below are the monthly payments. To find the yearly tuition, multiply the monthly amount by 10.
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 circle) M T W R F

	Preschool	Pre-K (Attending Kindergarten in fall of 2025)
3 Half Days	\$235	Not Available
5 Half Days	\$320	\$320

Full Day Options (8 AM-3 PM)
Below are the monthly payments. To find the yearly tuition, multiply the monthly amount by 10.
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 circle) M T W R F

	Preschool	Pre-K (Attending Kindergarten in fall of 2025)
3 Full Days	\$350	\$350
4 Full Days	\$410	\$410
5 Full Days	\$465	\$465

3. Please indicate the form of payment for tuition. Check all that apply.

- Private pay
- I am applying for an Early Childhood Grant*
- My child(ren) are already approved for publicly funded childcare benefits
- I am applying for publicly funded childcare benefits

*Students must be 3 or 4 as of 10/1/24 and family must be at or below the 200% federal poverty guidelines and reside in Ohio.

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 \$6 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