

**ST. VINCENT DE PAUL PRESCHOOL**  
**6828 Old Reid Road, Charlotte, NC 28210**  
**704-644-4656**

**REGISTRATION FORM**

**PLEASE PRINT**

Age/Class: \_\_\_\_\_ 2-Year-Old \_\_\_\_\_ 3-Year-Old \_\_\_\_\_ 4-Year-Old

Preferred Days: (T/Th or M/W/F or 5-day) (T/W/Th or M/W/F or 5-day) (M-Th or M-F)

Full Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name Child is Called: \_\_\_\_\_ Preferred Phone Number: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip Code

Preferred Communication Method? **Text** or **E-Mail** or **ClassDojo app** (please circle one)

Is child allergic to peanuts? Yes \_\_\_\_\_ No \_\_\_\_\_

Does child have other allergies? Yes \_\_\_\_\_ No \_\_\_\_\_

Is child potty trained? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

Business Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

Business Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Best E-mail Contact Address: \_\_\_\_\_

**NAMES OF PEOPLE TO CONTACT IN AN EMERGENCY:**

1. Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Is child currently enrolled in speech therapy, occupational therapy or any other special services? **YES** or **NO**

If so, what services and how often? \_\_\_\_\_

Other Children in Family:

NAME	AGE	M or F	NAME	AGE	M or F

Previous School Attendance Where: \_\_\_\_\_ When: \_\_\_\_\_

Reason for enrolling in preschool: \_\_\_\_\_

\_\_\_\_\_

# ST. VINCENT DE PAUL PRESCHOOL

## Registration Requirements

⇒ **ALL REGISTRATION FORMS MUST BE ACCOMPANIED BY PAYMENT**

Checks may be made Payable to:

*St. Vincent de Paul Preschool*

***ENROLLMENT IS NOT SECURED UNTIL FULL PAYMENT IS RECEIVED.***

1. Registration Fee \$100.00

(\$75.00 for each additional child)

2. Supply Fee

- 2 day class \$60
- 3 day class \$90
- 4 day class \$120
- 5 day class \$150

3. One Month Prepaid Tuition

- **The prepaid tuition will be applied to account in May 2027**
- *Next tuition payment will be due by September 10th.*

- |             |       |                 |
|-------------|-------|-----------------|
| • 2-day 2's | \$290 | T/Th            |
| • 3-day 2's | \$360 | M/W/F           |
| • 5-day 2's | \$600 | Mon.-Fri.       |
| • 3-day 3's | \$340 | T/W/Th or M/W/F |
| • 5-day 3's | \$550 | Mon.-Fri.       |
| • 4-day 4's | \$400 | Mon.-Thurs.     |
| • 5-day 4's | \$450 | Mon.-Fri.       |

4. Name and Signature on this Form

**THESE FEES & PREPAID TUITION ARE NON-REFUNDABLE**

*All enrollments must be authorized by Preschool Director  
and are based upon class availability.*

Child's Name \_\_\_\_\_

Class/Days to Attend \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

⇒ Class Placement determined by age on August 31.

⇒ Children must be Potty Trained for the 3- & 4-Year-Old Classes

⇒ Program Hours: 9:30-1:00