



# Registration Form 2024-25 School Year

To register your child please complete and return this form with the total Registration Fee to [St. John's Christian Preschool – 1804 Highland Ave. Eau Claire, WI 54701](#)  
Class sizes are limited and will be filled on a first come first serve basis.

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

Child's Birthdate: \_\_\_\_\_ Child's Age (on 9/01/24): \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Child's Shirt Size: youth x-small (4-6) \_\_\_\_\_ youth small (6-8) \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip

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

Email: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip

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

Email: \_\_\_\_\_

<u>Class</u> (Please check one)	<u>Days</u>	<u>Supply/Registration Fee</u> - Due upon registration. Covers year's supplies & t-shirt Non-refundable	<u>Tuition</u> Due the 7 <sup>th</sup> of each month September-May Covers monthly program cost
<input type="checkbox"/> 3-4 years olds <input type="checkbox"/> 4-5 year olds (Three days per week)	MWF AM	\$140.00	\$145.00
<input type="checkbox"/> 2½-3 year olds <input type="checkbox"/> 3-4 year olds (Two days per week)	TTh AM	\$100.00	\$105.00

**For Office Use**  
 Check No. \_\_\_\_\_ Date : \_\_\_\_\_  
 Amount: \_\_\_\_\_ Class: \_\_\_\_\_