

ST. JOHN'S EARLY LEARNING CENTER

2026-2027

Registration Form

Date: _____ Child's Name: _____ Class: _____

Date of Birth: _____ Gender: _____ Start Date: _____

Billing Information for Financially Responsible Parent:

Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

ANNUAL TUITION WILL BE INVOICED IN EQUAL 12 MONTH INSTALLMENTS AS FOLLOWS:

~Please circle one option~

	<u>Toddler 1</u>	<u>Toddler 2</u>	<u>Preschool/Pre-K</u>
2 Day Option (T/Th)	\$1,081	\$1,055	\$878
3 Day Option (M/W/F)	\$1,625	\$1,573	\$1,323
5 Day Option (M-F)	\$2,130	\$2,103	\$1,756

REGISTRATION FEE – Non-refundable: \$205 Registration + \$39 Blackbaud Tuition fee. At the time of registration, you will be given a web link to create a Blackbaud Tuition account and pay your Registration and Blackbaud Tuition fee. Your registration will not be complete until this is done.

ENROLLMENT - Within a few days of registering, you will receive an email from TADS asking you to complete our online enrollment process. Your enrollment will not be complete until this is done.

I hereby give permission to St. John's ELC to call a doctor or 911 for my child, should an emergency arise. It is understood that every effort will be made to locate family/guardians/persons listed as emergency contacts before any action will be taken. The people listed as emergency contacts are also authorized to give consent for emergency care regarding my child, unless otherwise specified. I give St. John's permission to share medical information regarding my child with teachers and support staff who are responsible for my child's safety and well-being during the school day.

Parent or legal guardian signature: _____ Date: _____