



LIL' SAINTS PRESCHOOL

Box 10, 3900 Arthur Drive, Delta B.C. V4K 3N5
Phone: (604) 946-4525 • Fax: (604) 946-0598 Website: www.shsdelta.org • Email: lil'saintspreschool@shsdelta.org

Application Form 2019

First month's fee plus \$50 application fee **must be pre-paid** and is **NON-REFUNDABLE**. (*Refundable only if your child is not accepted or if classes you requested are full*).

***Please circle the option you want to register for and indicate the days beside the option that you have chosen**

Option 1- Regular Preschool Class (3 years old) 8:45-11:15

2 Days/wk - 2.5 hrs \$125/month

3 Days/wk - 2.5 hrs- \$170/month

4 Days/wk- 2.5 hrs - \$220/month

5 Days/wk - 2.5 hrs- \$245/month

Option 2- Extended Preschool Class (3 years old) 8:45- 12:45

2 Days/wk - 4 hrs - \$205/month

3 Days/wk - 4hrs - \$290/month

4 Days/wk - 4 hrs- \$380/month

5 Days/wk - 4 hrs- \$430/month

*Children bring their own snacks and lunch. (Please refer to the JK payment schedule below for the full day options)

Junior Kindergarten (available for 4 years old or children going to kindergarten the following September)

Option 1 - 8:45- 12:45 - 4 hours program

2 Days/wk - 4 hrs - \$215/month

3 Days/wk - 4hrs - \$305/month

4 Days/wk - 4 hrs- \$400/month

5 Days/wk - 4 hrs- \$450/month

*** Snacks are included in the JK fees, you'll only need to send in lunch.**

Option 2 - 8:45 AM-2:45 PM Full Day Program. (Wednesday, 1:45 Dismissal, Friday, 12:45 Dismissal) Full Day Options Available for both classes (3 Year old and JK class)

2 Days/wk - \$290/month

3 Days/wk - \$405/month

4 Days/wk - \$550/month

5 Days/wk - \$ 590/month (Friday, 12:45 Dismissal)



LIL' SAINTS PRESCHOOL

Box 10, 3900 Arthur Drive, Delta B.C. V4K 3N5
Phone: (604) 946-4525 • Fax: (604) 946-0598 Website: www.shsdelta.org • Email: lil'saintspreschool@shsdelta.org

I have enclosed a cheque in the amount of **\$50 application fee**, and I understand that this is NON-REFUNDABLE. (***Cheques should be payable to Sacred Heart Parish.***) *The first month deposit is due upon admission and must be submitted with the completed registration package to hold a spot.*
**Returning students and siblings may issue just 1 cheque for both the registration fee and first month deposit.*

There will be a **\$15 NSF fee** for any returned cheques or PAP with insufficient funds.

I understand that I must give one full month's notice of withdrawal or I will pay for the following month.

Signature

Application Date: _____ #: _____*

Child's Name: _____
(Surname) (First Name)

Birthdate: _____ / _____ / _____
Year Month Day

Address: _____
Postal Code: _____

Email Address: _____

Mother's Name: _____ Telephone: _____

Father's Name: _____ Telephone: _____

Does your child have any Allergies? _____

Do you intend to apply to Sacred Heart School's Kindergarten in the future: Yes No

Has your child attended another preschool? Yes No

Name of previous preschool: _____

*Please Note: #. ___ is for administration purposes only and does not guarantee admission.