CHRIST ASCENSION PRESCHOOL 8300 Germantown Avenue Philadelphia, PA 19118 215-247-4233

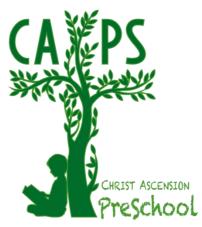
<u>APPLICATION FOR ENROLLMENT – 2023/2024 SCHOOL YEAR</u>

Child's Name
Toddler Program (15 months by September 15 th)
Days requested: MTWThF
2 days - \$425. per/mo 3 days - \$535. per/mo 5 days - \$670. per/mo.
Two Year Old Program - by September 15 th)
Days requested: MTWThF
2 days - \$400. per/mo 3 days - \$520. per/mo 5 days - \$660. per/mo.
Three Year Old Program - by September 15 th)
Days requested: MTWThF
3 days - \$420. per/mo 4 days - \$520. per/ mo 5 days - \$620. per/ mo.
Four Year Old and Pre-Kindergarten Programs
Days requested: M T W Th F
3 days - \$420. per/mo 4 days - \$520. per/ mo 5 days - \$620. per/ mo.
Early Drop Off - 8 am \$9/day 8:30am \$ 5/ day
Days requested: M T W Th F
Lunch Bunch 12pm – 4pm) Drop in rate is \$15.00/hour Monthly rates available for 9.50/hr
Days requested: M T W Th F
Hours Requested: 1pm 2pm 3pm 4pm
*School begins the first week of September each year and is in session until the second week of June. A non-refundable
registration fee of \$100 must be remitted with this application. Please make checks payable to Christ Ascension Preschool
(CAPS). Tuition is an annual rate broken down into 9 monthly payments for convenience. The rate does not change during
months with holidays, etc.
I agree to the terms as stated on this application and wish to enroll my child.
Signature of Parent or guardian:
Date:
Please remit this application and \$100 (No more than \$175 per family if more than one child is applying) non-refundable registration fee to: Christ Ascension Preschool 8300 Germantown Ave, Philadelphia, PA 19118
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Office use only

_____ Class:____

Registration Fee:____ Check #____ Dated:__



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Preferred Name	Gender	Date of Birth		
Primary Phone #	Email addr	ess		
Address	City	City Zip		
Parent 1 Name	Occupation			
Parent 1 Cell #	Work#			
Parent 2 Name	Occupation			
Parent 2 Cell #	Work #			
E-Mail				
Marital Status Siblings Name Age				
Others Living in Home: Has this child previously attended Preschool?Where? Family Church Affiliation Known Allergy Information				
Please list some of your child's favorite activities				
What would you like to see your child gain from attending our program:				