Holy Rosary Academy Preschool (Lic. #364830628)



2620 N. Arrowhead Avenue San Bernardino, CA 92405 (909) 886-1088

2024-2025 Preschool Tuition Rates

Full Day Program					
Program	Days	Times	Monthly	Multiple Child Discount	
5 Day	M-F	7:00 am - 6:00 pm	\$590.00	5% *	
3 Day	M/W/F	7:00 am - 6:00 pm	\$450.00		
2 Day	T/TH	7:00 am - 6:00 pm	\$360.00		

School Day Program					
Program	Days	Times	Monthly	Multiple Child Discount	
5 Day	M-F	7:30 am - 3:00 pm	\$495.00	5% *	
3 Day	M/W/F	7:30 am - 3:00 pm	\$380.00		
2 Day	T/TH	7:30 am - 3:00 pm	\$340.00		

Half Day Program					
Program	Days	Times	Monthly	Multiple Child Discount	
5 Day	M-F	7:30 am - 11:45 am	\$425.00	5% *	
3 Day	M/W/F	7:30 am - 11:45 am	\$335.00		
2 Day	T/TH	7:30 am - 11:45 am	\$290.00		

School fundraising is not required, but is encouraged to help and support the school community.

Preschool Tuition Plan Enrollment

Family Name:	Phone:	SS#
Student's Name	Date:	
	Program Requested:	
Full Day	School Day	□ Half Day
🗆 Monday - Friday	Monday/Wednesday/Friday	Tuesday/Thursday

I choose the above referenced plan for the 2024-2025 school year. I understand I must pay the tuition amount of \$_____ due on the 1st of each month and that a \$50.00 late fee will be assessed if my payment is not received in the school office by the 10th of each month. If my tuition payment is not made by the 15th of the month, my child will not be able to return to school until tuition is paid.

I understand a \$125.00 non-refundable registration fee per child is due yearly.

I have read the tuition plans outlined on this form. I agree to comply with the terms of the tuition plan selected. I agree to comply with the policies, rules, and regulations of Holy Rosary Academy as stated in the Parent Handbook and Diocesan Commitment Form.

Print Name

Signature and Date

Print Name

Signature and Date