

Student Name	
1st Class Choice	
2nd Class Choice	_

Date of Birth ______ Age as of 9/1/24 _____years ___ Application Date _____

____ months

Southborough Village Preschool Application Packet for the 2024-2025 School Year

Southborough Village Preschool 14 East Main Street Southborough, MA 01772 508-485-3109

Directors: Gretchen Hartnett and Laura Eppen

directors@southboroughvillage preschool.com

www.southboroughvillagepreschool.com

Southborough Village Preschool Class Request Form (2024-2025)

Child's Name:		
Date of Birth:	Age as of Sept. 1, 2024: year	s months
Place a #1 next to your first class choice ar	nd a #2 next to your second choice f	for the 2024-2025 school year.
Toddler Program (21 months-2.9 yrs.)	Tues/Thurs AM at Toddler House/16	East Main St. (8:45-11:30)
Toddler Program (21 months-2.9 yrs.) I	Mon/Wed/Fri AM at Toddler House/	16 East Main St. (8:45-11:30)
Preschool (2.9+) Tues/Thurs AM (8:45	5-11:45)	
Preschool (2.9+) Tues/Thurs PM (11:4	5-2:45)	
Preschool (Older Preschoolers/Pre-K)	Tues/Thurs Full Day (9-3)	
Preschool (2.9+) Mon/Wed/Fri AM (8	3:45-11:45)	
Preschool (2.9+) Mon/Wed/Fri PM (1	1:45-2:45)	
Full Day Pre-K Mon/Wed/Fri (9-3) (4.0 by September 1 st)	

* What has your child's previous preschool experience/class been_____

Important: Please note that the ages and numbers of our students can vary from year to year. As a result, we may need to make changes to the offered classes/schedules based on applications and enrollment.

Trying to decide what class to sign up for? We strongly suggest that you speak with your child's teacher, or a Director, to discuss which class will be best for your child's enrollment for the 2024-2025 school year.

Tuition rates and deposits are as follows for the 2024-2025 school year:

Two Day Toddler Program T/Th: \$3,718 (10% dep.=\$371)	3 Half-Day Program M/W/F AM: \$4,603 (10% dep.=\$460)
3 Day Toddler Program M/W/F: \$5,161 (10% dep.=\$516)	3 Half-Day Program M/W/F PM: \$4,045 (10% dep.=\$404)
2 Half-Day Program T/Th AM: \$3,316 (10% dep.=\$331)	2 Full-Day Program T/Th: \$5,427 (10%dep=\$542)
2 Half-Day Program T/Th PM: \$2,914 (10% dep.=\$291)	3 Full-Day Program M/W/F: \$7,533 (10% dep.=\$753)

Please Note: A non-refundable application fee of \$100.00 is due upon receipt of your application. In addition, a check for 10% of the tuition is due with your application. Within a few weeks of registration, we will notify you, with a Class Placement Letter, as to which class your child has been placed in. Please read, sign and return the letter by the date indicated on your Class Placement Letter. At this date, if you <u>choose to not accept</u> this placement, we will refund the 10% deposit to you, however the application fee is non-refundable. Should you <u>choose to accept</u> this placement, the 10% deposit will be applied towards your tuition for next year. <u>Once you have accepted a placement in a class for next year, this 10% deposit will become non-refundable</u>. Note: Placements will not be held after the date indicated on your Class Placement Letter. Please see a Director if you have any further questions.

Parent Signature	Date	
Director Use Only: Class	Registration Fee	Deposit

Southborough Village Preschool

14 East Main Street, Southborough, MA

Tel. 508 485-3109 or visit www.southboroughvillagepreschool.com

Child Enrollment Form

Child Information

Child's Name:	Date of Birth:
Age as of September 1, 2024: years	months
Child's Home Address:	
Home Phone Number:	
Sex Primary/Sp	ooken Language:
	•
Parent/Guardian Information	
Parent/Guardian #1 Name:	
Relationship to Child:	
Home Address:	
Business Address:	
Business Phone Number:	
Hours at Work:	
Parent/Guardian #2 Name:	
Relationship to Child:	
Business Name:	

Business Address:	
Business Phone Number:	
Hours at Work:	
•	•
Additional Information	
Child's Physician:	
Address:Pho	one Number:
Allergies/Special Diet?	
Individual Health Care Plan for child with a chronic health condition? If	yes, please check and attach.
Custody agreements/court orders/restraining orders pertaining to the child	d? If yes, please check and attach
Special limitations or concerns?	

Physical Exams/Immunizations/Lead Test

I certify that I will provide Southborough Village Preschool with current documentation of my child's annual **physical examination**, current **immunizations** and **lead screening**, in accordance with Massachusetts school health requirements. These items must be in your child's file before he/she begins school.

Parent initials _____ Date _____

Please Note:

A registration fee of \$100.00 plus 10% of your annual tuition is due at the time of registration, in order to hold your child's placement. The application fee is non-refundable. The 10% deposit will be deducted from your tuition in September and is also non-refundable, upon acceptance of a placement in a class (signed Class Acceptance Letter). Please see a Director if you have any questions about the registration procedure.

Parent/Guardian Signature	·	Date
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