

2025 Summer Enrollment / Registration Form

Child/Family Information:

nild's Name: Date of Birth:		irth:
School Age Student's Grade Level as of 2	2025/2026 School Year:	_
Parent/Guardian's Name:	Phone#:	
Email Address:		_
Parent/Guardian's Name:	Phone#:	
Email Address:		_
Days and Hours of Attendance: (Please i	note we have a three day a week minimur	n)
Days: (Please circle) Monday	Tuesday Wednesday Thursda	y Friday
Approximate hours of daily attendance	(ex: 8am-4pm, Not number of hours)	
Permission for Release of Child from St	t. John's ELC	
St. John's ELC has my permission to rele Legal Guardians.):	ease my child to the following people oth	er than primary care givers. (Parents or
Name:	Relationship:	Phone #:
Name:	Relationship:	Phone #:
Name:	Relationship:	Phone#:
Name:	Relationship:	Phone #:
Walking Trip Permission Off Site		
My child	has permission to go on walking	trips away from the premises of the
school under the supervision of his/he	er teachers (within 1.5-mile radius of the Public Library, Kercher Park, Historic Dis	school). Walking trips may include:
Parent Signature:		Date:

See other side

Photograph/Video Consent
I agree that my child may be photographed or videoed for school purposes only. YES or NO (circle one)
I agree that my child's photo or video may be shared to the school's webpage and or school's social media page. YES or NO (circle one)
Child's T-Shirt Size: (Circle one) Youth Extra Small Youth Small Youth Medium Youth Large Youth Extra Large
I understand that there is a non-refundable \$120 dollar registration fee required to hold my child's spot. I understand and agree that tuition will be charged for ALL hours or days my child is scheduled to attend whether he/she attends or not, payable one week in advance. I agree that my child is fully potty trained. I understand that my child's records must be on file by the first day of attendance. A medical and current shot record must be submitted to a preschool child's file

within the first thirty days of attendance. I understand that there is a 2 WEEK WITHDRAWAL NOTICE REQUIRED.

Parent/Legal Guardian Signature:______ Date: _____