



## St. Joseph School Summer Program

1961 Plum Street  
Pinole, CA 94564

510-724-0242  
www.stjosephpinole.com

### Preschool, TK and Kindergarten Summer School Enrollment Form



### Incoming Preschool, TK and Kindergarten SUMMER SESSION June 14<sup>th</sup> thru August 6<sup>th</sup>

#### **STEP 1: Prepare Documents**

- 1. Student Age Verification:** Students must be 2 years 8 months old by September 1 and potty-trained
  - Birth Certificate and Baptismal Certificate if Catholic
- 2. Health Requirements (ALL required):**
  - Immunization Record – use State of California for LIC701 PHYSICIAN'S REPORT form

#### **STEP 2: Once accepted, complete this Summer Registration/Tuition Form.**

**Download Additional Required Forms.** Please go to the ENROLLMENT tab – select Preschool Application Process finding the forms toward the bottom listed under Preschool Forms.

- **Submit Printed Forms Online or deliver to the office as part of the Registration Process**
- Print the forms **NOT** to be included with this enrollment form and bring to them the Office along with your Registration fee of \$150. The following is a list of all required forms.
- **State of California forms: LIC 613A, LIC 627, LIC 700, LIC 701, LIC 702, LIC 995 and LIC 995E - If incoming to preschool for the 2021-2022 school year.**
- Family Handbook Agreement (note: the Preschool Family Handbook is different than the TK-8<sup>th</sup> Grade Parent/Student Handbook. Preschool parents should read the Preschool Family Handbook found at [www.stjosephpinole.com](http://www.stjosephpinole.com) > Parent tab > Handbooks.

#### **STEP 3: Register with our easy-to-use cloud solution called Curacubby. (For new families only)**

The Curacubby system will allow you to pay and manage your invoices for your monthly tuition payments via FREE online and mobile bank pay. You can also quickly download your invoices and parent ledger statements from your computer, smartphone, or tablet to accommodate your flexible spending benefit programs.

- **To prepare for the first billing cycle:** We've pre-loaded your email address and your family info. Please read all the instructions carefully.
- Please be prepared to **pay the \$150 payment for the 2021 Summer School Enrollment fee.**

**NOTE: Incomplete Enrollment packets cannot be accepted and your child's place will not be held**

Once we have reviewed your completed Enrollment packet you will receive confirmation of your child's acceptance. **Tuition Confirmation can be viewed on your Curacubby account.**

**Preschool, TK and Kindergarten summer registration = \$150 (credited towards your July summer invoice)**

- You must commit to the full 8 weeks of Preschool Summer Session.
- We cannot discount for days parents choose their students to be absent.
- There is no discount for paying in-full for the Summer session.



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#### Tuition for Summer 2021 (includes dates school is closed for holidays)

Tuition is **non-refundable**. The school's operating budget is based on projected enrollment and the school's financial obligation does not change when students withdraw. **No adjustment** is made because of late registration, absence from class, days when school is not in session, planned closure, leaves of absence or the suspension or dismissal of a student by official action of the school.

An eight week contract/commitment to attend the Preschool is required. If unforeseen circumstances arise a 30-day written withdrawal notice must be provided if your family is to withdraw during the contracted summer months. If your family leaves the total contracted tuition will be expected to be paid.

The rates below are for an eight week summer school session as defined by the St. Joseph School calendar.

#### FULL DAY – Regular Summer Session

Days per week	Times	2 monthly installment payments due June 5 and July 5	Summer Tuition Paid in Full
5	7:00 am – 6:00 pm	\$1,000.00	\$2,000.00
3	7:00 am – 6:00 pm	\$750.00	\$1,500.00

#### HALF DAY – Regular Summer Session - morning only

Days per week	Times	2 monthly installment payments due June 5 and July 5	Summer Tuition Paid in Full
5	7:00 am – 12:00	\$750.00	\$1,500.00
3	7:00 am – 12:00	\$500.00	\$1,000.00

- Students may be dropped off between 7:30am to 8:15am as our day begins at 8:15am.
- Full-day students may be picked up between 12:00pm and 6:00pm.
- Half-day students may be picked up by 12:00pm.

**REMINDER:** A late pick up fee of **\$1/per minute** is payable to the teacher upon pickup.

may be dropped off between 7:00 am and 8:15 am. If students arrive **after 8:15 am** they are considered **tardy**. For every five (5) tardies, the parent will incur **\$25/hour per student**.

- Full-day students may be picked up between 3:15 pm and 6:00 pm.
- Half-day students must be picked up no later than 12:00pm.

**PLEASE PROCEED TO THE NEXT PAGE IN ORDER TO PROVIDE YOUR INFORMATION**

**Only complete this section if your child is not currently enrolled in our Preschool and TK programs**



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### 1) Student Information

Last Name	First Name	Middle Name	Registration Date
Primary language spoken at home	Current Age	Date of Birth (mo/day/year)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address, City, State, Zip			Home Phone
Place of Birth (City/State/Country)			

### 2) PARENT/GUARDIAN INFORMATION

Please check one: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other (please explain):	Last Name	First Name
	Street Address, City, State, Zip (if different from student)	
	Living with student? <input type="checkbox"/> No <input type="checkbox"/> Yes	Language Spoken at Home
	Business Phone	Cell Phone
	Home Phone	Email
	Employer	Occupation
Please check one: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other (please explain):	Last Name	First Name
	Street Address, City, State, Zip (if different from student)	
	Living with student? <input type="checkbox"/> No <input type="checkbox"/> Yes	Language Spoken at Home
	Business Phone	Cell Phone
	Home Phone	Email
	Employer	Occupation

### 3) STUDENT RESIDES WITH (please circle): Both Parents Mother Father Guardian(s) Other (please explain)

\_\_\_\_\_

### 4) OTHER CHILDREN IN FAMILY INFORMATION (List all children in order of birth date)

Name	Birth Date	Current School



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### 5) COURT ORDER

Are there any court orders restricting the legal rights of either parent? If you answered <b>YES</b> , please attach a copy of the court order to this form.	<input type="checkbox"/> No <input type="checkbox"/> Yes
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### Student Health Information

#### I. History of Illness: (If child had any of the following, give age. If severe, explain on back of page)

- |   |  |   |                   |
|---|--|---|-------------------|
| <input type="checkbox"/> Chicken Pox    | <input type="checkbox"/> Asthma          | <input type="checkbox"/> Pneumonia      | Operations? _____ |
| <input type="checkbox"/> Convulsions    | <input type="checkbox"/> Measles         | <input type="checkbox"/> Vision Problem |                   |
| <input type="checkbox"/> Anemia Allergy | <input type="checkbox"/> Rheumatic Fever | <input type="checkbox"/> Skin           | Accidents? _____  |
| <input type="checkbox"/> German Measles | <input type="checkbox"/> Heart Condition | Any other serious                       |                   |
| <input type="checkbox"/> Diabetes       | <input type="checkbox"/> Hay Fever       | illness? _____                          |                   |
| <input type="checkbox"/> Ear Infection  | <input type="checkbox"/> Mumps           |   |                   |

#### II. History of Symptoms: (Give age if your child has a history of one of the following)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> 4 or more colds a year | <input type="checkbox"/> Foot problems       | <input type="checkbox"/> Bedwetting         |
| <input type="checkbox"/> Frequent stomach ache  | <input type="checkbox"/> Worries a lot       | <input type="checkbox"/> Fainting spell     |
| <input type="checkbox"/> Tires easily           | <input type="checkbox"/> Frequent nosebleeds | <input type="checkbox"/> Runny ear          |
| <input type="checkbox"/> Frequent sore throats  | <input type="checkbox"/> Hernias             | <input type="checkbox"/> Trouble speaking   |
| <input type="checkbox"/> Frequent leg pains     | <input type="checkbox"/> Seems nervous       | <input type="checkbox"/> Tantrums           |
| <input type="checkbox"/> Angers easily          | <input type="checkbox"/> Coughs a lot        | <input type="checkbox"/> Frequent head ache |

#### III. Are there any questions or other problems you would like to discuss with the school administration?

(Please add any information here)

\_\_\_\_\_  
Parent/Guardian Signature of person financially responsible

\_\_\_\_\_  
Relationship to child

\_\_\_\_\_  
Parent/Guardian Name (Please print)

\_\_\_\_\_  
Date

If you are interested in attending St. Joseph School in the fall, you will need to apply online at [www.stjosephpinole.com](http://www.stjosephpinole.com)