Emmanuel Episcop Day School

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Emmand Episcopal	Registration Form 2025-2026			
Three Year Olds and PreK-Age As Of So	PreK-Age As Of September 30, 2025Attending MWF or M-F (circle 1)			
Two Year Olds-Age As Of March 31, 20	025Attending TuTh, MWF, or M-F (circle 1)			
EXTENDED CARE: CIRCLE AS NEEDED: Breakfa	ast Bunch AND/OR Stay and Play : 5 Days Per Week OR 3 Days Per Week OR 2 Days Per Week OR			
PLEASE PRINT CLEARLY				
Name to be posted in the classroom	Called in class			
STREET ADDRESS	CITYZIP			
EMAIL ADDRESS				
CHILD'S DATE OF BIRTH CUP	RENT AGESEXPRIMARY PHONE			
EMERGENCY NAME AND PHONE NUMBE	R (other than parents)			
MOTHER'S NAME	PHONE			
EMPLOYER	PHONEBUSINESS PHONE			
FATHER'S NAME	PHONE			
EMPLOYER	BUSINESS PHONE			
OCCUPATION				
NAME OF SIBLING	DOB			
NAME OF SIBLING	DOB			
NAME OF SIBLING	DOB			
MEDICAL INFORMATION				
DOES YOUR CHILD HAVE ANY ALLERGIES?				
	SHOULD BE AWARE OF?			
HAS HE/SHE EATEN PEANUT BUTTER? HAS HE/SHE EATEN TREE NUTS?	REACTION REACTION			
HAS HE/SHE EATEN EGGS?				
HAS HE/SHE EATEN DAIRY?				
	E PHOTGRAPHED OR VIDEOTAPED IN THE COURSE OF SCHOOL ACTIVITIES. I HEREBY GIVE CONSENT FOR ERTISING MATERIALS OR ON THE SCHOOL WEBSITE OR FACEBOOK PAGE. DATE			
	D'S LIKENESS FOR MARKETING, FACEBOOK OR THE SCHOOL WEBSITE.			
	MANUEL EPISCOPAL CHURCH?			
	FORM TO BE VALID. ENROLLMENT SUBJECT TO AVAILABILITY			
Cash or check, money order, cashier's check p	payable to EEDS or EMMANUEL EPISCOPAL DAY SCHOOL.			

 TO BE COMPLETED BY DAY SCHOOL DIRECTOR: IDENTITY VERIFICATION

 BIRTH CERTIFICATE # _____DOB _____ISSUED _____

 PLACE OF BIRTH ______INITIALS ______

 REGISTRATION FEE: \$200.00 OR \$185.00 OR \$215.00 CHECK # _____CASH ____DATE _____

PLEASE TURN OVER AND COMPLETE

REGISTRATION FEE: \$200.00 PER CHILD (NON-REFUNDABLE)		Beginning 6/1/25 \$215.00 PER CHILD		
REDUCED FEE FOR ACTIVE (NON-REFUNDABLE	DUTY MILITARY: \$185.00	Beginning 6/1/25 \$200.00 PER CHILD		
FOUR YEAR OLDS PreK: \$400.00 PER MONTH (Mor Five Days Per We				
	\$345.00 PER MONTH (Mor	nday, Wednesday, Friday)		
	Three Days Per W			
THREE YEAR OLDS:	\$400.00 PER MONTH (Mor Five Days Per Wee			
	\$345.00 PER MONTH (Mor			
	Three Days Per W			
TWO YEAR OLDS:	\$420.00 PER MONTH (Mor	nday-Friday)		
	Five Days Per Wee			
	\$360.00 PER MONTH (Mor			
	Three Days Per W			
	\$315.00 PER MONTH (Tues			
FXTI	Two Days Per Wee			
EXTENDED DAY-Monthly payment for ATTENDANCE 5, 3, or 2 days per week Breakfast Bunch 8:00-9:00 Stay AND Play 12:30-2:00/5 Days \$360.00 per month/3 Days \$250.00 per month/ 2 Days \$170.00 per month				
Breakfast Bunch Only/5 Days \$160.00 per month/3 Days \$106.00 per month/2 Days \$74.00 per month				
Stay and Play Only/5 Days \$235.00 per month/3 Days \$154.00 per month/2 Days \$106.00 per month				
Occasional Breakfast Bunch \$10.00 per day/Stay and Play \$20.00 per day				
A 10% discount, off the lower rate, is given for the second child when two children from the same family attend during the same school year.				
Currently, we accept cash, checks, money orders and cashier's checks.				
Tuition payments are due by the 1 st of each month. Any payment made after the 10 th of the month will be subject to a \$15.00				
late fee. Tuition fees are based on the annual school calendar and are divided into 9 equal payments for your convenience. No reimbursement will be given due to illness, vacations, holidays or emergency closings. There will be no makeup days.				
Initials	due to inness, vacations, nonday	s of emergency closings. There will be no makeup days.		
		 One month paid notice in writing is required in advance of I for the next monthInitials 		
		r child's ability to adjust to our school environment. If your end a school to you that will better meet your child's needs.		
due to acceptance in other staff, and budget. Our tea	public/private preschool prog	I Church. Summer notifications and withdrawals from school grams have a strong negative impact on our class assignments, gistered students during the month of June. For planning following statements:		
I have not and do not intend to apply to any other public or private preschool program for my child. If plans change				

I have not and do not intend to apply to any other public or private preschool program for my child. If plans change and I apply somewhere, I will notify EEDS immediately of the pending application. ______(parent signature)