 PAINTBOX ENROLLMENT

Paintbox Preschool, 321 High Street, Cumberland, RI 02864

Jeanne Waxgiser, Director Cell – 401-465-5349 School – 401-727-2468

Nursery Group – Children entering school at age 3, turning 4 during the year attend on Monday & Wednesday

9:00 – 1:00 $3,250 Yearly Tuition 10 Payments of $325 9:00 – 3:00 $4,000 Yearly Tuition 10 Payments of $400

Pre-K Group – Children entering the school at age 4 by September 1, and turning 5 during the (entering kindergarten the following fall) attend on Tuesday, Thursday, & Friday

9:00 – 1:00 $4,000 Yearly Tuition 10 Payments of $400 9:00 – 2:00 $4,500 Yearly Tuition 10 Payments of $450 9:00 – 3:00 $5,000 Yearly Tuition 10 Payments of $500

\*We open the school at 8:50 a.m. each day and close the school at 3:00 p.m. \*Tuition Payments are made on the first of each month from August 1through May 1.

\*A Registration Fee is required at Enrollment. The fee for newly enrolled students is $100. Children who are returning for their second year will be charged $50 for registration

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_ Enrollment Date \_\_\_\_\_\_\_\_\_\_\_\_\_ Start Date \_\_\_\_\_\_\_\_\_\_ OR Returning Student \_\_\_\_\_\_\_\_\_

Please Circle M/W 9-1 M/W 9-3 T/Th/F 9-1 T/Th/F 9-2 T/Th/F 9-3 Other \_\_\_\_\_

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_

Name of Parent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration Fee \_\_\_\_\_\_\_\_ Check Number \_\_\_\_\_\_\_\_\_\_\_