

For Office Use Only
Date: _____ Time _____ # _____
Check# _____ Contract _____

**Pleasant Ridge Presbyterian Preschool**  
**5950 Montgomery Rd.**  
**Cincinnati OH 45213**  
**(513) 631-0170**  
[anna.prpps@gmail.com](mailto:anna.prpps@gmail.com)

### Enrollment Application (2021-2022)

Please submit a separate application for each child you wish to enroll and complete both sides of this form. Priority enrollment (2020-2021 enrolled children and siblings) begins at 1:00 pm on January 10<sup>th</sup>-18<sup>th</sup>. Open enrollment applications will be accepted starting at 8:30am on January 19<sup>th</sup>. Applications will be considered in the order in which they are received. Each application must be hard copy (not emailed) and accompanied by a **non-refundable \$65 registration fee (check or money order only)**.

**Early submissions will not be accepted. Please note enrollment dates and times.**

**Child's name** \_\_\_\_\_

Name usually called: \_\_\_\_\_ this name will be used to identify him/her in the classroom (cubby, name tags etc...)

Gender: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age on 9/1/2021 \_\_\_years \_\_\_months

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Name of Parent(s) or Legal Guardian(s)**

Mother's/ Guardian 1 (please include the email address you want to be the primary means of communication)

Name \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

Telephone Numbers: Home: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

Father/ Guardian 2 (please include the email address you want to be the primary means of communication)

Name \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

Telephone Numbers: Home: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

How, or from whom, did you learn of Pleasant Ridge Presbyterian Preschool?

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List schools and group programs your child has previously attended with the dates of attendance \_\_\_\_\_

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List Names and D.O.B. of any siblings at home and the schools they attend \_\_\_\_\_

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Part-time Preschool Options (please indicate order of preference 1st, 2<sup>nd</sup>, 3<sup>rd</sup>)

AM Class: **9:00-12:00** PM Class: **12:30-3:30**

\_\_\_ 2-Day AM T/TH ages: 2 ½ /3s (2 ½ by September 1<sup>st</sup>)

\_\_\_ 3-Day AM MWF age: 3s

\_\_\_ 4-Day AM age: 4/5s (Tuesday-Friday)

\_\_\_ 5- Day AM ages: 4/5s

\_\_\_ 4-Day PM (mixed age group 3-5) (Tuesday-Friday)

\_\_\_ 3-Day PM (mixed age group 3-5) (Tuesday, Wednesday, and Thursday)

Tuition Summary:

5 day a week class      \$2,610 /school year

4-day a week class      \$2,511/school year

3-day a week class      \$2,007/school year

2-day a week class      \$1,710/school year

\$65 Registration Fee per child (\$55 active church members)

\$120 materials fee due at acceptance of enrollment

These fees are non-refundable

5% second child discount on youngest child