



Trinity- First Weekday School

2018-2019 SCHOOL YEAR

August 13, 2018 – May 24, 2019*

PRE-KINDER ENROLLMENT CONTRACT

(4 yrs. on or before Sept. 30th)



Registration Fee/Supply Fee: (All Reg. Fees Non-Refundable)	\$350	
Early Morning: 7:30 a.m. -8:30 a.m.	\$3.25 per hour or portion of hour	
Pre-Kinder Tuition	8:30 - 11:30 a.m.	\$255
After School Enrichment: 11:30 a.m. - 5:30 p.m.	\$3.25 per hour or portion of hour	
Pre-Kinder Extended Tuition	8:30- 2:30 p.m.	\$430*
Pre-Kinder ASE: 2:30 p.m. -5:30 p.m.	\$3.25 per hour or portion of hour	
*November and March (\$385), December (\$330)		
Tuition Due- 1 st five business days of the month- \$15 late fee		



- Specializing in Early Childhood since 1952 (66 yrs.)
- 50/50 Dual Language Facility (Spanish and English)
- Licensed Time to Sign Center- incorporating ASL throughout
- Only Faith Based Program Accredited by the **N**ational **A**ssociation for **E**ducation of **Y**oung **C**hildren
- Discounts: Siblings, Military, and Church Members \$10/per mo.
- Full registration payment must be received by July 31, 2018. Otherwise, placement will be revoked and placed on waiting list. Admission is not complete until full registration fee is paid. Bookkeeper- 915-533-2674 ext. 17

*Dependent upon the EPISD school calendar for 2018-2019

Day School Director: Mrs. Letty Ruvalcaba 533-2674 ext.23 letty@trinity-first.org

TRINITY-FIRST WEEKDAY SCHOOL

ENROLLMENT CONTRACT 2018-2019

I understand that the registration/supply fee is non-refundable. If for any reason my child does not complete the full year, I will give the Director notice by the 15th of the current month. Otherwise, the following month's tuition will be applicable.

Signature _____ Date _____

Child's Name _____ DOB _____

Parents/ Guardians: _____

Mom Cell: _____ Mom Work: _____

Dad Cell: _____ Dad Work: _____

Address: _____ Zip: _____

Text Message: Yes or No Carrier (i.e. ATT, T-Mobile) _____

E-mail: _____ Notices to E-mail: Yes or No

Initial One: Morning only (ASE optional) _____ Extended (2:30p.m. daily, grace till 2:45p.m.) _____

Office Only- Reg. / Supply Fee
\$ _____ placed as deposit
_____ Date
(Initials) _____
Date Total Complete _____
To be paid in full by July 31, 2018

Full registration payment must be received by July 31, 2018. Otherwise, placement will be revoked and added to the waiting list. Initials _____