

TRINITY-FIRST WEEKDAY SCHOOL

2025-2026 SCHOOL YEAR

August 4, 2025 - June 5, 2026

KINDERGARTEN

ENROLLMENT CONTRACT

(5 yrs. on or before Sept. 30)



| Registration Fee/Supply Fee: (All Reg. Fees Non-Refundable) | \$350 | | | |
|--|---------------------------------|-------|--|--|
| Before March 31 Early Registration: | \$300 | | | |
| Deposit of \$100 will hold the Early Registration Discount | | | | |
| Kindergarten Monthly Tuition | 8:30am - 2:30pm | \$450 | | |
| Due- 1 st five business days of the month | | | | |
| Early Morning: 7:30 a.m8:30a.m. Kindergarten ASE: 2:30 p.m3:30 p.m. | \$4 per hour or portion of hour | | | |
| Extended 3:30 p.m5:30 p.m. | \$5 per hour or portion of hour | | | |
| Full-Time 7:30 a.m5:30 p.m. | \$810 | | | |



Time to Sight inc.

- Specializing in Early Childhood since 1952 (73 yrs.)
- ➤ 50/50 Dual Language Facility (Spanish and English)
- ➤ Licensed Time to Sign Center- incorporating ASL throughout
- ➤ Only Faith Based Program Accredited by the National Association for Education of Young Children
- ➤ Individualized Instruction
- Discounts: Siblings, Military, and Church Members \$10/per mo.- \$30 max. discount
- Admission is not complete until full registration fee is paid.
- Day School Director: Mrs. Letty Ruvalcaba 533-2674 ext.206 * Submit Form to tfdayschool@gmail.com



TRINITY-FIRST WEEKDAY SCHOOL

(K) ENROLLMENT CONTRACT 2025-2026

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

| Signature | Date | | |
|------------------------------|--------------------------------------|-------------------------|--|
| Child's Name | | | Office Only- Reg. / Supply Fee \$ placed as deposit |
| Primary Language: Spanish | I / English / Other _ | | Date |
| Parents/ Guardians: | | | (Initials) — Date Total Complete |
| Mother's Cell #: | Work #: To be paid in full by May 30 | | To be paid in full by May 30 |
| Father's Cell #: | Work #: | | |
| Address: | | Zip | : |
| Text Message: Yes | or No o | Carrier (i.e. ATT, T- | Mobile) |
| E-mail: | | Notices to E-mail: | Yes O or No O |
| Afterschool Program: Yes | s O No Occas | sional Appro | ximate Pick-up time: |
| Initial one: Class only (ASI | E optional) | Full-Time (7:30-5:30p.r | n.) |