



2023-24 Holy Angels Preschool 4 Year Old Program Options & Tuition

Child must be 4 years old by September 30, 2023 and completely Potty Trained.

Schedule Options and Annual Tuition
(Paid in 10 equal monthly payments through FACTS Management)
Spots are limited. First come, first served.

*EdChoice may not be used for our Preschool Program.

Student's Name _____

Option 1- 7:20 am - 11:00 am

- ☐ Monday/Wednesday/Friday.....\$2200
- ☐ Monday-Friday.....\$3600

Option 2 7:20 am - 2:20 pm

- ☐ Monday/Wednesday/Friday.....\$4300
- ☐ Monday-Friday.....\$7000

Preschool After Care is available for an additional
charge of \$5.00 per hour/per child.

HOLY ANGELS



2023-24 Preschool Registration Form

STUDENT INFORMATION

First Name _____ Middle Name _____ Last Name _____

Street _____ City _____ Zip _____

Phone _____ Email Address _____

Birthday _____ Birth Place _____

Student Religion _____

GENDER

Holy Angels abides by the teachings and rules of the Catholic Church, and Faith is integrated into all aspects of the school's activities. According to the Catholic Faith, a person's sexual identity is rooted in one's biological identity as male or female. Holy Angels considers the gender of all students as being consistent with their biological sex, including participation in school athletics and teams, school-sponsored dances, dress and uniform policies, the use of changing facilities, showers, locker rooms, sleeping accommodations on trips, titles, names and pronouns, and school records. As an applicant/registrant and/or parent/guardian for admission to Holy Angels, I understand and agree to this policy. Please state your child's biological sex below:

Check One: ☐ Male ☐ Female

ETHNICITY

(Check All That Apply) ☐ White/Caucasian ☐ Hispanic ☐ Black/African-American ☐ Asian
☐ Native American ☐ Pacific Islander ☐ Other _____

PARENT AND FAMILY INFORMATION

STUDENT RESIDES WITH ☐ Mother & Father ☐ Mother Only ☐ Father Only ☐ Guardian
☐ Other _____

If there is custody, visitation, or other legal agreements or orders concerning the student or access to the student's records, please present the paperwork with this application so that a copy may be placed in the records.

MOTHER'S NAME: _____

☐ Mother ☐ Stepmother ☐ Guardian

Address (if different from student)

Marital Status _____ Religion _____

Home Phone _____ Cell Phone _____ Work Phone _____

Place of Employment _____ Occupation _____

Registered Member of Holy Angels Parish?

FATHER'S NAME: _____

☐ Father ☐ Stepfather ☐ Guardian

Address (if different from student)

Marital Status _____ Religion _____

Home Phone _____ Cell Phone _____ Work Phone _____

Place of Employment _____ Occupation _____

Registered Member of Holy Angels Parish?

Names and Ages of Siblings _____

I will be responsible for informing Holy Angels School office of any changes to the above information. I verify that all information that I have provided is true and accurate. I hereby agree that my child and I shall abide by to the policies, rules, and regulations of Holy Angels School at all times. It is also my understanding that the policy of Holy Angels School is to make no refunds on Registration Fees.

Parent Printed Name

Parent Signature

Date

New Family Registration Fee is \$175.00 per family.
Payments can be made in Exact Cash, Money Order, or Checks
payable to Holy Angels School.
**Registration Fees are not-refundable*