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ST. JAMES FAMILY CENTER  
[www.stjamesfamilycenter.org](http://www.stjamesfamilycenter.org)

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# Preschool Pre-registration Form

Please return as soon as possible

Email Address: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

*Street Address*

\_\_\_\_\_  
*City, State, and Zip*

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Last tax year's income: \_\_\_\_\_

*(For determining if income eligible for ECEAP – information will be kept confidential)*

Family Size: \_\_\_\_\_

## Preschool class requested:

M-W-F AM \_\_\_\_ (4 year-old private pay and ECEAP 3 and 4 year-old)

M-W-F PM \_\_\_\_ (4 year-old private pay and ECEAP 3 and 4 year-old)

**\$25.00 non-refundable fee for non-ECEAP families**

Children must be at least 3 years old by August 31<sup>st</sup>