



Thank you for considering Holy Spirit Pre-School. We are very excited to welcome the youngest members of the community to the Holy Spirit Family.

Our class offerings and tuition amounts for the 2018-2019 school year are as follows:

Mornings* (pre-K)	Monday, Tuesday, Thursday and Friday <b>**\$180.00 a month for the 4 day class</b>	8:15 am - 11:00 am
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Afternoons** (3 and 4 year olds)	Tuesday, Thursday and Friday <b>**\$145.00 a month for the 3 day class</b>	11:45 am - 2:15 pm
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**\* The morning class is four days per week and is designed for four and five year old children who will be enrolled in kindergarten the following year (2019-2020). Your child must turn 4 years old before September 30, 2018 to be eligible for this class.**

**\*The Tuesday-Thursday-Friday afternoon class is three days a week and is designed to meet the needs of three year olds and younger four year olds.**

- **A child must be potty trained before attending our pre-school.**
- **The registration fee to reserve your child's placement is \$100.00 and is non-refundable. The \$100.00 will be applied to your tuition.**
- **Checks can be made out to Holy Spirit Pre-School.**
- **Holy Spirit Pre-Schoolers will be guided through play and activities from the Creative Curriculum that are age appropriate.**

*A handbook will be given to each family at our Open House in August. If you would like one before that time, please call the Pre-School Office (614.861.4559) and we can arrange to send you one.*

Thank you again for considering our program at Holy Spirit. We feel truly blessed to be given this opportunity to assist you in the development and growth of your most treasured gifts from God. We look forward to meeting you soon!

Please return your registration form and fee as soon as possible as children are given a spot in class on first-come, first-serve basis.

Sincerely,

Mrs. Anne Heinmiller and Mrs. Angela Welsh



4382 Duchene Lane  
Columbus, OH 43213  
614-861-4559

ENROLLMENT APPLICATION

**Student Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

LAST FIRST M.I.

Social Security \_\_\_\_\_ Grade: \_\_\_\_\_

Home Parish: \_\_\_\_\_

Catholic <input type="checkbox"/>	Male <input type="checkbox"/>	Birth Date	Birthplace
Non-Catholic <input type="checkbox"/>	Female <input type="checkbox"/>		
		Month/Day/Year	City/State

**Residence**

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Race** (you are not required to answer this):

White, not Hispanic  Black, not Hispanic  Hispanic

Asian Pacific Islander  American Indian/ Alaskan Native

<b><u>Father or Guardian:</u></b> _____	Birthplace: _____	Religion: _____
Education: _____	Type of Occupation: _____	
Place of Occupation: _____	Business Phone: _____	

<b><u>Mother or Guardian:</u></b> _____	Birthplace: _____	Religion: _____
Education: _____	Type of Occupation: _____	
Place of Occupation: _____	Business Phone: _____	

**Home Status:**

Check any that apply:

Parents separated  Parents divorced  Single

Father deceased  Mother deceased

( If parents are separated or divorced, a copy of custody papers must be presented to school.)

Student lives with:

Both parents  Father  Mother  Other (step-parent)

Number of children in family: \_\_\_\_\_ Boys: Older \_\_\_\_\_ Younger \_\_\_\_\_ Girls: Older \_\_\_\_\_ Younger \_\_\_\_\_

**Sacraments:**

Baptism: \_\_\_\_\_ First Communion: \_\_\_\_\_  
(month, day, year)/(Church, city, state) (month, day, year)/(Church, city, state)

Penance: \_\_\_\_\_ Confirmation: \_\_\_\_\_  
(month, day, year)/(Church, city, state) (month, day, year)/(Church, city, state)

For office use only: Date: _____ Class: _____ Fee Paid: _____ Check # _____
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<b>Please include:</b>
<ul style="list-style-type: none"> <li>• Copy of birth certificate</li> <li>• Copy of baptismal certificate</li> <li>• Copy of Social Security Number</li> </ul>