

St. Benedict Catholic School Early Learning Center
2022-2023 Preschool and Daycare Registration

14600 Turney Road
Maple Heights, Ohio 44137
216-475-3633

Welcome to St. Benedict Catholic School Early Learning Center Preschool and Daycare! Registration is open for the 2022-2023 school year. We are offering 9 month and 12 month options for the early childhood program ranging from infants - preschool. Children enrolled in the 9 month option will follow the SBCS academic calendar. Children enrolled in the 12 month option will attend year round and follow a condensed holiday schedule. Please note your child's placement is not guaranteed for the 2022-2023 school year until the school office has received the registration forms and the \$150 non-refundable fee per family. Children will be placed in the order in which registration forms are received. Please contact the school office at 216-475-3633 if you need additional information.

Thank you for choosing St. Benedict Catholic School Early Learning Center.

God Bless,
Mrs. Christine Malone
St. Benedict Early Learning Center Director

Registration Checklist (please return all documents listed below):

- _____ Registration Information
- _____ Application for Admission
- _____ 2022-2023 Tuition Payment Options Form
- _____ Copy of Birth Certificate
- _____ Copy of Baptismal Certificate (if applicable)
- _____ Permanent Record Form
- _____ Child Enrollment and Health Information
- _____ Child Medical Statement and Immunization Record
- _____ Family Information
- _____ Emergency Medical Authorization
- _____ Legal Custody Information
- _____ Rediker Database Contact Information
- _____ Media Consent and Release Form
- _____ Handbook Acknowledgement
- _____ Registration Fee of \$150 per family (non-refundable)
Checks should be made payable to St. Benedict Catholic School

_____ Office Use Only
_____ \$150 Registration Fee _____ Payment Plan _____ Child Care Voucher

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Application for Admission

Parent Name: _____

Parent Name: _____

Place of Employment: _____

Place of Employment: _____

Occupation: _____

Occupation: _____

Work Number: _____

Work Number: _____

Cell Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Email Address: _____

Address: _____
Street City State Zip

Child(ren):

Child's Full Name	Birthdate	Gender	Program
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you affiliated with a Church/Parish? Yes No If Yes, name of church/parish _____

Are there any other details about your child(ren) that are important for SBCS to know? _____

How did you hear about St. Benedict Early Learning Center?

Current Family Website Friend/Neighbor Facebook

Newspaper Church/Parish Bulletin Other

Why would you like your child(ren) to attend St. Benedict Early Learning Center?

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Family Name: _____

Child(ren) Name: _____

Program Child(ren) Enrolling: _____

9 Month Programs run September - May
 12 Month Programs run September - August

Please mark appropriate programs.

Infant/Toddler (6 weeks old - 18 months old)

_____ 9 Month Program Option A: Part-time Care _____ Monday-Friday 6:30 a.m. - 6:00 p.m. \$5,400 annually 7-25 Hours/Per Week -- Part-Time	9 Month Program Option B: Full-time Care Monday-Friday 6:30 a.m. - 6:00 p.m. \$8,255 annually 25-60 Hours/Per Week -- Full Time
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_____ 12 Month Program Option A: Part-time Care _____ Monday-Friday 6:30 a.m. - 6:00 p.m. \$7,200 annually 7-25 Hours/Per Week -- Part-Time	12 Month Program Option B: Full-time Care Monday-Friday 7:00 a.m. - 6:00 p.m. \$11,005 annually 25-60 Hours/Per Week -- Full Time
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Toddler (18-36 months old)

_____ 9 Month Program Option A: Part-time Care _____ Monday-Friday 6:30 a.m. - 6:00 p.m. \$4,860 annually 7-25 Hours/Per Week -- Part-Time	9 Month Program Option B: Full-time Care Monday-Friday 6:30 a.m. - 6:00 p.m. \$7,200 annually 25-60 Hours/Per Week -- Full Time
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_____ 12 Month Program Option A: Part-time Care _____ Monday-Friday 7:00 a.m. - 6:00 p.m. \$6,480 annually 7-25 Hours/Per Week -- Part-Time	12 Month Program Option B: Full-time Care Monday-Friday 7:00 a.m. - 6:00 p.m. \$9,600 annually 25-60 Hours/Per Week -- Full Time
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Preschool Ages 3.4.5

_____ 9 Month Program Option A: Academic Program Only Monday-Friday 8:00 a.m. 11:30 a.m. \$2,070 annually	_____ 9 Month Program B: Academic Program Only Monday-Friday 8:00 a.m. - 2:30 p.m. \$3,925 annually	_____ 9 Month Program C: Full Time Care Monday-Friday 6:30 a.m. - 6:00 p.m. \$6,400 annually
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Preschool Ages 3.4.5

_____ 12 Month Program:
 Full Time Care
 Monday-Friday
 6:30 a.m. - 6:00 p.m.
 \$8,640 annually