

# St. Timothy's Pre-School

432 Van Buren Street  
Herndon, VA 20170  
703-437-4767

3 Yr Old Registration Form 2026-2027  
[sttimothypreschool432@gmail.com](mailto:sttimothypreschool432@gmail.com)

For Office Use	
Date rec'd _____	Reg Fee _____
Start Date _____	Check # _____
PF Sent _____	Pkt given _____
Class _____	Wait List _____

**3 Yr Old Classes (Children born by 9/30/2023. Must be fully potty-trained.)**  
**\$125 NON-REFUNDABLE REGISTRATION FEE DUE WITH THIS FORM (\$100 each additional child)**

**Please Indicate Your Top Choice For Classes:**

<b>Morning Program (8:45AM - 12:00 PM)</b>
_____ 2 Day T/Th \$315 per Month
_____ 3 Day MWF \$415 per Month
_____ 4 Day T-F \$480 per Month
_____ 5 Day M-F \$550 per Month

<b>Morning Program + STAC (8:45 AM - 4:00 PM)</b>
_____ 4 Day T-F \$975 per Month
_____ 5 Day M-F \$1,125 per Month

Check any that apply:

New \_\_\_\_\_ Returning Child \_\_\_\_\_ Alumni Family \_\_\_\_\_ St. Timothy's Church Member \_\_\_\_\_

Child's Name \_\_\_\_\_ Girl \_\_\_\_\_ Boy \_\_\_\_\_  
Last First Middle

Name to be called at school \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ City, State and Zip \_\_\_\_\_

Father's Name _____	Mother's Name _____
Father's Address (if Different from Above) _____	Mother's Address (if Different from Above) _____
Cell/Home Phone _____	Cell/Home Phone _____
Work Phone _____	Work phone _____
Email Address _____	Email Address _____
Name of Employer _____	Name of Employer _____

Food Allergies/Restrictions \_\_\_\_\_ EpiPen Required \_\_\_\_\_

Is your child receiving or have they been referred for any supplemental services (i.e. speech, OT, PT, vision) \_\_\_\_\_

Does your child speak/understand English? \_\_\_\_\_ What language does your child speak at home? \_\_\_\_\_

Previous school experience \_\_\_\_\_ Name of Program \_\_\_\_\_

### PLEASE READ AND INITIAL EACH OF THE FOLLOWING:

*I understand that the first tuition payment and activity fee are due on June 1, 2026 in order to guarantee my child's place in the program, and that the remaining 8 payments will be paid on the 1st of each month, beginning on September 1, 2026.* \_\_\_\_\_

*I understand that the first tuition payment (due June 1, 2026) is non-transferable (to another month or to another student) and is non-refundable after August 1, 2026.* \_\_\_\_\_

*I understand that the first tuition payment is refundable ONLY if the school receives written notice of my intent to withdraw my child by August 1, 2026.* \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Turn Over for Optional Program Registration



# Optional Programs

Optional Programs are available both *before* school (Early Birds) and *after school* (Lunch Bunch and/or Extended Day). You may choose to register for these programs in two ways:

**(A) full school year contract or (B) the monthly or drop in basis**

**Please Indicate any Optional Programming you would like to request:**

**(A)**

*Full Year Early Birds (7:45 - 8:45 AM)*

\_\_\_\_\_ 4 Day T-F \$115 per Month for full year

\_\_\_\_\_ 5 Day M-F \$140 per Month for full year

*Full Year Extended Day (4:00 - 4:30 PM)*

\_\_\_\_\_ 4 Day T-F \$85 per Month for full year

\_\_\_\_\_ 5 Day M-F \$100 per Month for full full year

**(B)**

*Monthly Early Birds (7:45 - 8:45 AM)*

\_\_\_\_\_ Monthly or Drop-in Rate \$11 per day

*Monthly Extended Day (4:00 - 4:30 PM)*

\_\_\_\_\_ Monthly or Drop-in Rate \$15 per day

*Lunch Bunch (12:00 - 1:30PM)*

\_\_\_\_\_ Monthly sign-up or Drop-in Rate \$18 per day