



St. Al's Campus  
 2401 Main Ave.  
 Kaukauna, WI 54130  
 (920) 759-4566  
 Susan Onkels, Director  
 sonkels@kcsonline.org

Open Monday – Friday

7 AM – 6 PM

**For children ages 3 yrs – 5 yrs old**

Full-Time \* Part-Time \* As Needed

\$150. Weekly \* \$35. Daily \* \$20. Half Day

\$50. Registration Fee / Child

(Please call for additional information)

**Let us walk your child to and from PreSchool/PreK!**

**Primary Admission Form**

Father \_\_\_\_\_ Mother \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

Child #1 \_\_\_\_\_ F M Age \_\_\_\_\_ DOB \_\_\_\_\_

Child #2 \_\_\_\_\_ F M Age \_\_\_\_\_ DOB \_\_\_\_\_

Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ As Needed \_\_\_\_\_

Projected Starting Date \_\_\_\_\_

Day	Arrival Time	Arrival Time	Departure Time	Departure Time
	Child #1	Child #2	Child #1	Child #2
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

**Financial Agreement**

Based on the days and times reserved for your child, your weekly fee shall be \$ \_\_\_\_\_ payable by Friday (or the last day each week your child is in attendance) for the following week's care. There will be a **\$5.00 Late Fee** if payment is not **received** by Friday. Fees are charged for the contracted hours regardless of attendance.

**All schedule changes require a dated and signed two-week written notice.**

\_\_\_ I prefer a monthly invoice and understand that I will **prepay** these charges.

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