

# EXETER DAY SCHOOL

## 2025-2026 Registration Form

Please email completed form to [registration@exeterdayschool.com](mailto:registration@exeterdayschool.com)

CHILD'S NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

Please list names of siblings who attended EDS: \_\_\_\_\_

GUARDIAN NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE(S): \_\_\_\_\_

EMAIL ADDRESS(ES): \_\_\_\_\_

Please select the class for which you are registering. If your first choice is full, you may be put on a wait list while registering for another option. Please note these preferences.

### **TODDLER 2's** (2 years old by September 30, 2025)

			<u>Tuition</u>
Two-Day (T, TH)	8:30 am – 11:15 am	Annual \$3,336	Quarterly \$834.00
Three-Day (M,W,F) <b>FULL</b>	8:30 am – 11:15 am	Annual \$4,994	Quarterly \$1,248.50

### **PRESCHOOL 3's** (3 years old by September 30, 2025)

Two-Day (T, TH)	8:45 am – 1:00 pm	Annual \$4,608	Quarterly \$1,152.00
Two-Day (T, TH)	8:45 am – 2:45 pm	Annual \$5,598	Quarterly \$1,399.50
Three-Day (M,W,F) <b>FULL</b>	8:45 am – 1:00 pm	Annual \$6,912	Quarterly \$1,728.00
Three-Day (M,W,F) <b>FULL</b>	8:45 am – 2:45 pm	Annual \$8,403	Quarterly \$2,100.75

### **PREKINDERGARTEN 4's** (4 years old by September 30, 2025)

Two-Day (T, TH)	8:45 am – 1:00 pm	Annual \$4,608	Quarterly \$1,152.00
Two-Day (T, TH)	8:45 am – 2:45 pm	Annual \$5,598	Quarterly \$1,399.50
Three-Day (M,W,F) <b>FULL</b>	8:45 am – 1:00 pm	Annual \$6,912	Quarterly \$1,728.00
Three-Day (M,W,F) <b>FULL</b>	8:45 am – 2:45 pm	Annual \$8,403	Quarterly \$2,100.75
Four-Day (M-TH) <b>FULL</b>	8:15 am – 1:00 pm	Annual \$8,782	Quarterly \$2,195.50
Four-Day (M-TH)	8:15 am – 2:45 pm	Annual \$10,965	Quarterly \$2,741.25
Five-Day (M-F)	8:15 am – 2:45 pm	Annual \$12,437	Quarterly \$3,109.25

Please select any that apply: (This information informs our planning for the 2025-2026 school year)

My child receives/received Early Intervention services.      My child has an IEP (Individualized Education Program)

My child has been evaluated for and/or currently receives speech or occupational therapy services.

Additional notes: \_\_\_\_\_