



Dear Preschool Parents/Guardians,

Welcome to the Knights Preschool Program at St. Mary Academy. Preschool is a special place where children acquire the fundamentals of learning while developing early literacy, math, and social skills. At St. Mary Academy, our focus is on the development of the whole child as we prepare our youngest learners to become confident, curious, and life-long learners.

St. Mary Academy is a faith-based school community serving students in grades PreK3 through 8. Rooted in Catholic/Christian values, our parish-sponsored school provides a nurturing environment where children learn, grow, love, and serve. We offer a rich STREAM program designed to encourage students to reach their full potential through engaging academic instruction and meaningful extracurricular opportunities. Students build a strong foundation that allows them to continue growing in faith, wisdom, and knowledge as Disciples of Christ.

In the Knights Preschool Program, children ages three (3) and four (4) benefit from the same enriching learning environment as our older students. Along with academic growth, children are immersed in a STREAM-based curriculum that supports creativity, critical thinking, and exploration.

The PreK Wing features five (5) spacious learning environments dedicated to our PreK3 and PreK4 classrooms. Preschool students participate in school-wide Religious Formation and STREAM activities, as well as weekly specials including art, music, physical education, technology, library, and Spanish. Our preschool program emphasizes educating the whole child—academically, socially, emotionally, and spiritually.

Core academic instruction is provided by New Jersey State-certified teachers supported by dedicated classroom aides. During STREAM Fridays and technology classes, students are introduced to laptops and tablets to enhance letter recognition, early typing skills, and fine motor development.

All preschool students must be three (3) or four (4) years old by October 1. In accordance with New Jersey state guidelines, students are not eligible for Kindergarten unless they are five (5) years old by October 1. Additionally, children must be fully toilet-trained and have all required immunizations up to date prior to the start of the school year.

I welcome you to join us as we march on as the Knights of St. Mary Academy. For more information, please visit our website at www.stmaryknights.org. If you would like a personal tour of our Knights Preschool Program, please do not hesitate to reach out to me at (609) 597-3800.

May God continue to bless you and your families.

Warmly,

A handwritten signature in black ink, reading 'Lizanne M. Coyne'.

Lizanne M. Coyne
School Principal



KNIGHTS PRESCHOOL PROGRAM

Tuition and Other Important Information
NO TUESDAY/THURSDAY OPTION FOR PREK4

| Full Day 9am-3:15pm | Days of the Week | Tuition Rate | Parish Rate * | |
|------------------------|---------------------|-----------------|---------------|--------|
| | | | Year 1 | Year 2 |
| 5-day | Monday-Friday | \$7827 | \$7327 | \$6827 |
| 3-day | Mon/Wed/Fri | \$5448 | \$4948 | \$4448 |
| 2-day | Tuesday/Thursday | \$4250 | \$3750 | \$3250 |

| Half Day 9am-12pm | Days of the Week | Tuition Rate | Parish Rate * | |
|----------------------|---------------------|-----------------|---------------|---------|
| | | | Year 1 | Year. 2 |
| 5-day | Monday-Friday | \$6175 | \$5675 | \$5175 |
| 3-day | Mon/Wed/Fri | \$4586 | \$4086 | \$3586 |
| 2-day | Tuesday/Thursday | \$3956 | \$3456 | \$2956 |

Supporting Parishes*
 Must be member of one of these parishes!

St. Mary's (Barnegat, Manahawkin)
 St. Francis (Brant Beach)
 St. Pius X (Forked River)
 St. Theresa (Tuckerton)
 St. Elizabeth Ann Seton (Whiting)

REGISTRATION INFORMATION

The following is a checklist of all information and forms required prior to enrollment;

- Copy of Birth Certificate (Do not need again if already on file)
- Copy of Baptismal Certificate (Do not need again if already on file)
- Registration Application
- Student Profile, if not already on file or changes have occurred
- Photo Consent Form
- Tuition Contract
- Parish Form * (Do not need again if already on file)
- Universal Health Form and Immunizations*
- Re-registration Fee (\$100 check/money order, non-refundable)
- Fundraising Fee (\$400 check/money order to OPT OUT). Please see New Volunteer Guidelines.

*Parish and Health Forms must be submitted from parish pastor and health professional. All immunizations must be up to date! St. Mary Academy does not accept Religious or Medical Exemption. Please contact the school for more information.

Kindergarten Registration As per the Diocese of Trenton, St. Mary Academy must abide by Stafford Township School District's policy on the appropriate age to enter Kindergarten. If entering Kindergarten, children must be five (5) years old on or before October 1 of the current year. **Please be mindful of this policy when registering for Knights Preschool.**

PRESCHOOL DRESS CODE

Regulation school uniforms are worn by students in Pre-School through Grade 8. Uniforms are to be worn from the first day of school through the last day. The dress code is to be followed on a regular basis.

Pre-School Uniform:

Regulation uniforms are to be worn by all students (K-8) for physical education and daily for Pre-K students. These uniforms are purchased through Flynn & O'Hara Uniforms, 2145 NJ Rt. 35. Holmdel, NJ 07733 at (732)-888-3885.

The Physical Education and Pre-School uniform consists of:

- Gray t-shirt with school logo
- Navy mesh shorts worn no more than 3 inches above the knee
- Navy sweatshirt
- Navy sweatpants (required for winter uniforms)
- White socks
- Well-fitted tie sneakers that are white in color or complement the uniform (minimal color), no hi-tops or clunky sport shoes

Jewelry, Hair, Etc.:

Students may wear one religious medal and chain, a simple watch, and one ring. Girls may wear one pair of small post earrings; however, earrings for boys are not permitted. Necklaces, bracelets, hair wraps, dangling earrings, dark nail polish/gels/tips and make-up are not permitted.

Hair coloring of any kind is not permitted for boys and/or girls. Hairstyles are to be neat and conservative. Girls' hair accessories are to be kept simple and to a minimum. Boys' hair should be short and well groomed. Boys' hair length may not exceed the top of the collar and should be above the eyes. Fad haircuts (e.g. Mohawk, cut out designs, and uneven cuts) and highlighting of any kind are prohibited. Body piercing or body art is prohibited.



2026-2027 TUITION CONTRACT
PreK-8th Grade

Parent/Guardian Name where Student Resides _____

Address _____

Home Phone _____ Cell Phone _____

| Child's Name | Grade Entering |
|--------------|----------------|
| | |
| | |
| | |
| | |

Registered Parish _____

Choice of Payment: (Please check your choice of payment Option)

I understand that the FACTS enrollment fee is a non-refundable fee and is not deducted from my tuition bill.

A \$25 late fee will be applied in FACTS for each late payment.

_____ Option 1 – FACTS Tuition payment in full by July 1, 2026.
 (Annual Fee: \$5.00)

_____ Option 2 - FACTS Tuition - Two half payments payable in July and January
 (Annual Fee: \$15.00)

_____ Option 3 - FACTS Tuition - monthly payment plan (July-April) 10 months
 (Annual Fee: \$50.00)

Please note: Families registering after July 1st and choosing Option 3 will automatically be put on a monthly payment plan that completes in April 2027.

Is this a change in payment method from last year? Yes _____ No _____

St. Mary Academy NEW Parent/Guardian Volunteer Program Guidelines

Volunteers are an essential part of the St. Mary Academy community.

Our students, faculty, and staff deeply value the time and dedication of our parent volunteers. Their support strengthens every aspect of school life — academically, spiritually, and socially. When each family shares their talents and energy, our community grows stronger, more connected, and more vibrant. In addition, volunteering helps us close the gap in our tuition costs and the actual cost to educate each child.

Family Volunteer Commitment

At St. Mary Academy, we believe that active family involvement strengthens our school community and enriches every child's educational experience. Each family is required to contribute a minimum of **20 volunteer hours** toward school-sponsored activities each academic year. Families who do not complete the required service hours by June 2, 2027 will be assessed a **\$20 fee for each unfulfilled hour**. Please note that excess volunteer hours do not carry over to the following school year. For the purpose of fulfilling volunteer hours, family members include parents, legal guardians, and grandparents only.

Reporting Hours

Each family is responsible for tracking and logging their own volunteer hours. Volunteer log forms are available on the school website and are also distributed at Back-to-School Night. The Event Chairperson must validate and sign off on all volunteer hours. Please submit completed forms to the school on November 30, February 28, and June 2 to ensure accurate tracking. We recommend keeping copies of all submitted service forms for your records.

Fees, Deadlines, and Opt-Out Option

Volunteers are the key to making all of our programs possible. We encourage every family to get involved and to model the spirit of service for their children. However, we understand that it may be difficult for some families to find time to volunteer. Families may choose to **Opt-Out** of volunteering by:

- Submitting a **signed, written statement** to the principal indicating their choice to Opt-Out of volunteer hours and pay the **\$400 Opt-Out fee**.

If you choose to Opt-Out, a **\$400 fee** will be charged to your **FACTS account** in the month of September. If you decide to volunteer later in the year, we would be delighted to have your participation; however, **refunds cannot be issued** once the Opt-Out fee has been processed.

Together, through service and participation, we continue to build a thriving, faith-filled community for our students.

Safe Environment

All school volunteers who have contact with minors are required to complete the **VIRTUS Protecting God's Children** training program, which is valid for four years. All volunteers must maintain an active account at virtusonline.org with current documentation for the following:

- Volunteer Application (one time only) can be found in the Main Office.
- VIRTUS Training
- Formal Background Checks
- Code of Conduct Forms

Volunteering on School Grounds

All volunteers are required to sign in at the Main Office upon arrival and sign out upon departure. In addition, all volunteers must wear their Diocese of Trenton issued ID visibly at all times while on school grounds. Please note that signing in at the Main Office does not serve as a record of volunteer service hours. Families must still record their hours on the official Volunteer Log Form to ensure proper credit is given toward their family volunteer commitment.

Qualifying Volunteer Opportunities

Listed below are some of the qualifying volunteer activities including but not limited to:

- Recess and Lunch Duty
- PTA Board Member
- Room Parents
- Book Fair
- Kids Kastle Christmas Shop
- Calendar Raffle Ticket Sales
- Chocolate Sales
- Field Day
- Development Events
- Parish Picnic
- International Food Festival
- School Musical
- Head Coach/Assistant Coach
- Working the concession stand at games
- Working the score board
- Working the front door/tickets/entry fee table
- Setting up an athletic event
- Cleaning up after an athletic event
- Line Judge for Volleyball match
- Gift Auction Solicitation
- Gift Auction Basket Wrapping
- Gift Auction Ticket Sales
- Gift Auction Set Up
- Gift Auction Break Down
- Mother/Son Bowling
- Father/Daughter Dance
- Campus Grounds Clean Up
- Teacher Appreciation Week
- Parish Carnival
- Parish/School Clothing Drive



Parish Participation Form

Must be signed by sending parish Pastor

_____ is an active member of _____
(Parent/Guardian Name) (Parish)

Parish and is the parent/guardian of _____. As an active member of the parish
(Name of child)

the parent/guardian participates in the celebration of Mass regularly and financially contributes to the support of the parish.

Pastor's signature

Date

Date Registered in Parish _____

Knights Preschool

**St. Mary Academy
400 DOC CRAMER BLVD.
MANAHAWKIN, NJ 08050**

Today's Date

Child's Last Name | First | Middle | Gender (M or F)

Mailing Address | City | State | Zip

Home Telephone | Cellular Telephone | Date of Birth / / | Place of Birth (city, state)

Religion | Registered Parish | Parish City/Town

Country of Citizenship | Public School District of Residence | Email address

Sacramental History – Baptism Parish | Baptism Parish City, State | Baptism Date

Please indicate your program preference

| (Please Circle Age) | | F=Full Day H=Half Day | | 1 st choice 2 nd choice | |
|---------------------|------------|-----------------------|-----------------------------------|---|--|
| 3-Year-Old | 4-Year-Old | F | 5 - Monday through Friday | 9:00am– 3:15pm | |
| 3-Year-Old | 4-Year-Old | H | 5 - Monday through Friday | 9:00am – 12:00pm | |
| | | | | | |
| 3-Year-Old | 4-Year-Old | F | 3 - Monday, Wednesday, and Friday | 9:00 am– 3: 15pm | |
| 3-Year-Old | 4-Year-Old | H | 3 – Monday, Wednesday, Friday | 9:00am – 12:00pm | |
| | | | | | |
| 3-Year-Old | N/A | F | 2 – Tuesday and Thursday | 9:00am – 3:15pm | |
| 3-Year-Old | N/A | H | 2 - Tuesday and Thursday | 9:00am - 12:00pm | |
| | | | | | |

Person Responsible for Payment _____

FAMILY BACKGROUND

| Name | Home Address | <u>Current Employer</u> Current Occupation | <u>Work Telephone</u> Cellular Telephone | Religion | Education |
|-------------------------------------|--------------|---|---|----------|--|
| Father | | _____ | (w) _____ (c) _____ | | __ Elementary __ Secondary __ College __ Advanced |
| Mother (include maiden name) | | _____ | (w) _____ (c) _____ | | __ Elementary __ Secondary __ College __ Advanced |
| Guardian | | _____ | (w) _____ (c) _____ | | __ Elementary __ Secondary __ College __ Advanced |

Relationship of guardian to student, if applicable: _____

Home situation (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Two Parents | <input type="checkbox"/> One Parent | <input type="checkbox"/> Parents separated or divorced |
| <input type="checkbox"/> Restructured-mother/stepfather | <input type="checkbox"/> Father remarried | <input type="checkbox"/> Mother remarried |
| <input type="checkbox"/> Restructured-stepmother/father | <input type="checkbox"/> Other | |

Child resides with _____

Parental rights (in case of separation or divorce) _____

Copy of most recent court order received _____ Date _____ Date on Court Order: _____

Language spoken at home _____

SIBLINGS

| Complete Name | Date of Birth |
|---------------|---------------|
| | |
| | |
| | |
| | |



Photograph Consent Form

During the school year, events will take place that demonstrate the amazing happenings of St. Mary Academy. Such activities include, but are not limited to, afterschool clubs, Flex program, in school events, field trips, school plays, and more. Photographs and videos will be taken and used in a variety of capacities such as yearbook, print material, social media, and local newspapers.

Please be advised that children will not be identified in any form of social media.

However, children's names will appear in the school yearbook. If you do not wish to have your child appear in the yearbook, his photo and name will be removed. This includes the class picture.

Please complete the form below and return it to school by September. It is important that St. Mary Academy have one form for every child. If you have multiple children in the school, please complete a form for each child. If the consent is not returned, you child will be on the DO NOT photograph list and he will NOT appear in the school yearbook.

St. Mary Academy Photo Consent Form

Child Name _____ Grade _____

Homeroom Teacher _____

Please check one option below:

YES, I give permission to St. Mary Academy to allow my child to be photographed for public relation activities during the school year. I understand this may include Yearbook, Social Media, St. Mary Academy and Parish websites, local newspapers. I understand that my child will not be identified in these pictures with the exception of the class page in the school yearbook.

Yearbook Only, I give permission for my child's photo and name to appear in the school yearbook.

No, I do not give permission for my child to be photographed in any capacity. I understand that my child will NOT be pictured or listed in the school yearbook.

Parent/Guardian Signature

Date



Student Profile

Please answer the questions on this form to the best of your ability. Some questions may be easy to answer, while others may require more thought. Your responses will help the school staff, together with the teacher, determine the educational program that is best suited for your child.

This questionnaire is confidential and your responses will be shared only with professional personnel and only if the information learned will help in planning an educational program for your child.

Name of Child _____ Birthdate _____

Parent's Name _____

Phone Number _____

Cellphone Number _____

I. GENERAL HEALTH

Please check any health concern that you or your doctor has noticed.

- | | | |
|--|--|--|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Bed Wetting | <input type="checkbox"/> Lack of consciousness |
| <input type="checkbox"/> Indigestion | <input type="checkbox"/> Allergies | <input type="checkbox"/> Chronic ear infections (More than 2/years) |
| <input type="checkbox"/> Constipation | <input type="checkbox"/> Serious Blows to the Head | |
| <input type="checkbox"/> Diarrhea | <input type="checkbox"/> Headaches | <input type="checkbox"/> Overtired or lacking pep |
| <input type="checkbox"/> Vomiting | <input type="checkbox"/> Nightmares | <input type="checkbox"/> Heart trouble |
| <input type="checkbox"/> Stomachaches | <input type="checkbox"/> Thumb sucking | <input type="checkbox"/> Hyperactivity |
| <input type="checkbox"/> Frequent fevers | <input type="checkbox"/> Nail biting | <input type="checkbox"/> Medical problems immediately after birth |
| <input type="checkbox"/> Sinus trouble | <input type="checkbox"/> Epilepsy (seizures) | |
| <input type="checkbox"/> Nose bleeding | <input type="checkbox"/> Diabetes | |

Other physical problems (explain):

Is this child presently on medication? _____ If so, please indicate what medication, dose and frequency. _____

Has your child had any significant injuries or hospitalization?

Has your daughter begun menses? _____ If yes, when? _____

Does your child have any health problems that the school should be aware of?
(If so, what?) _____

Does your child have any food allergies? _____

| | Yes | No |
|--|-------|-------|
| 1. Do you suspect any hearing problems? | _____ | _____ |
| 2. Does your child: | | |
| a. Seem to have difficulty hearing? | _____ | _____ |
| b. Turn up the TV louder than other members of the family? | _____ | _____ |

- c. Seem to favor one ear over the other? _____
- d. Jump or appear to be more startled than others if there is a sudden noise? _____
- e. Seem to hear you if you talk in a whisper? _____
- 3 Does your child:
 - f. Make you talk loudly or repeat frequently? _____
 - g. Become confused in following more than two verbal directions at a time? _____
 - h. Have difficulty remembering things for a long time? _____
 - i. Have difficulty remembering things for a short time? _____

VISION

Has your child ever had a vision examination or treatments: _____ Yes _____ No

When _____ Who _____ Results _____

- | | Yes | No |
|---|-------|-------|
| 1. Do you suspect vision problems? | _____ | _____ |
| 2. Does your child: | | |
| a. Seem to have difficulty seeing small lines or pictures | _____ | _____ |
| b. Seem to have a problem seeing things far away? | _____ | _____ |
| c. Squint? | | _____ |
| d. Wear glasses? | | _____ |
| e. Have eyes that turn in? | _____ | _____ |
| f. Have eyes that turn out? | _____ | _____ |
| g. Sit very close to TV? | _____ | _____ |
| h. Rub eyes a lot? | _____ | _____ |
| i. Turn head as to use primarily one eye? | _____ | _____ |
| j. Lower one side of the head when looking at others? | _____ | _____ |

II. DEVELOPMENT

- 1. At what age did your child: Walk alone _____ feed him/herself _____
- 2. Is your child right/left handed? _____
- 3. Does your child dress him/herself? _____

MOTOR DEVELOPMENT

Do you feel your child has adequate large muscle coordination?

| | YES | NO |
|--|-------|-------|
| Does your child: | | |
| 1. Catch a ball thrown to him? | _____ | _____ |
| 2. Enjoy physical activities? | _____ | _____ |
| 3. Lose balance; trip & fall more often than normal? | _____ | _____ |
| 4. Have difficulty running? | _____ | _____ |

III. LANGUAGE DEVELOPMENT

At what age did your child first begin to speak? Give approximate age if you do not remember exact age: _____

First words _____ Two or three words together _____

Sentences _____

Does your child:

- 1. Stutter? _____ Yes _____ No
- 2. Have difficulty expressing ideas and concepts? _____ Yes _____ No

IV. SOCIAL EXPERIENCES

1. Check the places your child has visited?

- | | | |
|---------------------|-----------------|-------------------|
| grocery store _____ | factories _____ | mountains _____ |
| dairy _____ | ocean _____ | foothills _____ |
| farm _____ | museum _____ | downtown _____ |
| zoo _____ | airport _____ | county fair _____ |

2. Where has your child traveled? _____

3. How has your child traveled? _____

4. Has your child attended Nursery School? _____ For how long? _____

Which one? _____

5. Does your child play quietly or actively? _____

6. Is there any other information that will help us understand your child? _____

V. SOCIAL DEVELOPMENT

| Does your child: | YES | NO |
|------------------|-----|----|
|------------------|-----|----|

| | | |
|---|-------|-------|
| 1. Have regular playmates the same age? | _____ | _____ |
|---|-------|-------|

| | | |
|---|-------|-------|
| 2. Have difficulty getting along with other children? | _____ | _____ |
|---|-------|-------|

| | | |
|---|-------|-------|
| 3. Prefer to play with other children instead of alone? | _____ | _____ |
|---|-------|-------|

| | | |
|------------------------------|-------|-------|
| 4. Become easily frustrated? | _____ | _____ |
|------------------------------|-------|-------|

| | | |
|---------------|-------|-------|
| 5. Cry often? | _____ | _____ |
|---------------|-------|-------|

| | | |
|--------------------------------|-------|-------|
| 6. Accept discipline & limits? | _____ | _____ |
|--------------------------------|-------|-------|

| | | |
|-----------------------------------|-------|-------|
| 7. Enjoy cooperating with others? | _____ | _____ |
|-----------------------------------|-------|-------|

| | | |
|--|-------|-------|
| 8. Become frequently irritated or moody? | _____ | _____ |
|--|-------|-------|

| | | |
|--|-------|-------|
| 9. Become upset by changes in routine? | _____ | _____ |
|--|-------|-------|
