



HILLCREST PROGRESSIVE SCHOOL APPLICATION 2026/2027

59 PLYMBRIDGE ROAD, TORONTO, ON M2P 1A2
P: 416-489-8355 C: 647-405-1929
info@hillcrestschool.ca

Date _____

Fees _____

HILLCREST PROGRESSIVE SCHOOL IS ENROLLED IN THE CWELCC FUNDING PROGRAM.

I hereby make application for the enrolment of the following child as a pupil in the Central Jewish Institute operating as Hillcrest Progressive School for the year 2026/2027. I agree to abide by the rules and regulations of the School. It is understood that enrolment is for the full program year of September to June. ("Program Period"). No allowance can be made for absenteeism. The Student Accident Insurance Fee is included in the fees listed below.

CHILD'S NAME _____

MALE _____ FEMALE _____ AGE _____ BIRTHDATE _____

ADDRESS _____ CITY _____ POSTAL CODE _____

PARENT NAME _____ CELL PHONE _____

EMAIL ADDRESS _____

OCCUPATION _____

PARENT NAME _____ CELL PHONE _____

EMAIL ADDRESS _____

OCCUPATION _____

PROGRAMS: HOT LUNCH IS INCLUDED IN ALL PROGRAMS.

TODDLER (2024/25 birthdate) MORNING: 8:45 am - 12:30 pm _____ FULL DAY: 8:45 am - 3:45 pm _____

PRESCHOOL (2023 birthdate) MORNING: 8:45 am - 12:30 pm _____ FULL DAY: 8:45 am - 3:45 pm _____

DEPOSIT #1 MUST BE PAID WHEN THE APPLICATION IS SUBMITTED. THE BALANCE MUST BE SUBMITTED WITH THE APPLICATION FORM IF PAYING BY CHEQUE or CREDIT CARD. Cheques are payable to "HILLCREST PROGRESSIVE SCHOOL" or by CREDIT CARD (2.5% fee).

INDICATE WHICH FORM OF PAYMENT WILL BE USED FOR THE DEPOSIT: ☐ CHEQUE ☐ CREDIT CARD ☐ E-TRANSFER

FEE SCHEDULE

PROGRAM	TODDLER AM 9:00 - 12:30	TODDLER FULL DAY 9:00 - 3:30	PRESCHOOL AM 9:00 - 12:30	PRESCHOOL FULL DAY 9:00 - 3:30
ORIGINAL PROGRAM TUITION	\$11,395	\$19,995	\$10,500	\$16,995
CWELCC REDUCED FEES AM - \$18/DAY FD - \$22/DAY	\$3,582	\$4,378	\$3,582	\$4,378
DEPOSIT W/ ENROLMENT	\$2,000	\$2,000	\$2,000	\$2,000
BALANCE FEB 1/2027	\$1,582	\$2,378	\$1,582	\$2,378

PARENT SIGNATURE: _____ DATE: _____



**HILLCREST PROGRESSIVE SCHOOL
ACKNOWLEDGEMENT REGARDING FEES 2026/2027**

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THE UNDERSIGNED ACKNOWLEDGES THAT S/HE HAS READ THE APPLICATION FOR ENROLMENT TO HILLCREST PROGRESSIVE SCHOOL AND UNDERSTANDS THE FOLLOWING SCHOOL POLICIES:

- 1. PAYMENTS BY CREDIT CARD ARE SUBJECT TO A 2.5% SERVICE FEE ("SERVICE FEE").**
- 2. IF YOU DECIDE TO WITHDRAW YOUR CHILD FROM A PROGRAM, YOU MUST GIVE 30 DAYS' NOTICE BY EMAILING THE SCHOOL'S OFFICE ("WITHDRAWAL NOTICE"). REFUNDS WILL BE ISSUED BASED ON CWELCC DAILY RATE CALCULATED FROM LAST DAY OF CARE.**
- 3. THERE SHALL BE NO REFUNDS FOR ANY DAYS OR WEEKS MISSED.**
- 4. APPLICATIONS RECEIVED AFTER THE PROGRAM HAS BEGUN REQUIRE TUITION TO BE PAID IN FULL UPON ENROLMENT. THIS AMOUNT WILL BE PRO-RATED TO THE START DATE.**

**THE UNDERSIGNED FURTHER ACKNOWLEDGES THAT THESE POLICIES
WILL BE STRICTLY APPLIED BY THE SCHOOL.**

DATED THIS _____ DAY OF _____, 20_____.

PRINT name of parent/guardian: _____

SIGNATURE of parent/guardian: _____