

2011-12 Celebrating Children Preschool Registration Form



Registration for (choose one):

Yellow Class (3 & 4 year old): 9:00-11:30 (Mon. & Wed.) _____

Blue Class (3 & 4 year old): 9:00-11:30 (Tues. & Thurs.) _____

Green Class (4 & 5 year old morning class): 9:00-11:30 (Tues. Wed. & Thurs.) _____

Red Class (4 & 5 year old afternoon class): 12:30-3:00 (Tues. Wed. & Thurs.) _____

High Five: 9:00-11:30 (Mon. Tues. Wed. & Thurs.) _____

Child's Name _____

Preferred Name _____

Home Phone _____

Address (include City and Zip Code) _____

E-Mail Address _____

Date of Birth _____ Male _____ Female _____

Name of Mother/Stepmother _____

Occupation/Business Name _____

Mother's Work Phone _____ Mother's Cell Phone _____

Name of Father/Stepfather _____

Occupation/Business Name _____

Father's Work Phone _____ Father's Cell Phone _____

Name, age and school (if applicable) of siblings...

Has anyone in your family previously been enrolled at Celebrating Children Preschool? If so, who & when?

Has your child attended preschool before? If so, where and how long?

If a Non-Member, would you like to receive information about Shepherd of the Valley Lutheran Church and our activities? Yes _____ No _____

I hereby agree that, if my child is accepted by the school, I will pay the monthly fee in advance, by the 15th of the month, and will cooperate with the school in carrying out any requirements set for the parents. I will notify the school of any changes in the information as entered on this record.

I hereby agree to notify the school two weeks in advance of withdrawal, should such an event occur, or pay the difference.

An immunization record must be on file in order for the child to attend. A personal interview with the child and one parent is a pre-admission requirement. After a trial period, the school reserves the right of dismissing a child who does not fit into the school's program or whose parents do not cooperate with the school.

SIGNED _____ Date _____
(Mother or legal guardian)

SIGNED _____ Date _____
(Father or legal guardian)

Please attach a check to the completed registration form which includes a

\$50.00 non-refundable registration fee plus ½ month's tuition of \$52.50 for a total of \$102.50 for the 3 & 4 year old classes

or

\$50.00 non-refundable registration fee plus ½ month's tuition of \$67.50 for a total of \$117.50 for the 4 & 5 year old classes

or

\$50.00 non-refundable registration fee plus ½ month's tuition of \$80.00 for a total of \$130.00 for the High Five class

Tuition is refundable until July 1, 2011 for all classes

In the event that my child does not get into the session that has been requested, please...

___ put my child's name on the morning waiting list (3/4's please circle M & W T & Th or Both)

___ put my child's name on the afternoon waiting list (only available to 4/5 class)

___ put my child's name on both the morning and afternoon waiting lists (only available to 4/5 class)

___ remove my child's registration

and

destroy or return my check. (circle one)

(For office use only)

REGISTRATION INFORMATION

3/4 Year Old Mon/Wed morning class _____ 3/4 Year Old Tues/Thurs morning class _____
4/5 Year Old morning class _____ 4/5 Year Old afternoon class _____
High Five class _____

Date Paid: _____

Amount Paid: _____

Check Number: _____