

2017-2018 School Year

Registration Form

Little Lamb Preschool
Christ Lutheran Church
2610 Campbell St.
Valparaiso, IN 46385
462-6660, Ext 14

Application Date _____

Office Use:

\$65 Registration Fee _____
Birth Certificate copy _____
Immunization record copy _____
Auto-Debit form or Sept. tuition _____

- ____ Beginners T/T AM 8:45 - 11:15 AM (\$110/month). 3 & 4 year olds. Must be 3 by August 1, 2017 (3 classes)
- ____ Beginners 3 session AM (M, W, & F) 9 - 11:30 (\$150/month). 3 & 4 year olds. Should be 3 by Feb 1, 2017 (1 class)
- ____ Beginners 3 session PM (M, W, & F) 12:30 - 3 (\$150/month). 3 & 4 year olds. Should be 3 by Feb 1, 2017(1 class)
- ____ Pre-K AM (Mon/Wed/Fri) 8:45 - 11:15 AM (\$145/month). 4's & 5's. Must be 4 by August 1, 2017 (2 classes)
- ____ Pre-K PM (Mon/Wed/Fri) 12:15 - 2:45 PM (\$145/month). 4's & 5's. Must be 4 by August 1, 2017 (1 class)
- ____ Young 5's AM (Monday through Friday) 9:00-11:30 (\$215/month). 4's & 5's. Should be 4 by June 1, 2017 (1 class)
- ____ Young 5's PM (Monday through Friday) 12:30-3 pm (\$215/month). 4's & 5's. Should be 4 by June 1, 2017 (1 class)

Please include a non-refundable \$65.00 Registration Fee due at the time of this application. Registration will not be processed without the registration fee. Please indicate first and second choice of class desired. You will be notified of your placement as soon as possible.

Additional paperwork is due by June 1st to confirm spot. This includes:

- Copy of Child's birth certificate and Copy of Child's Immunization record
- Completed Auto-debit form from *Simply Giving* with canceled check attached. Those using electronic payments will have their auto-debits taken August through April (form will be provided). **If paying monthly tuition with check or cash, September's tuition is due by June 1, 2017** September's tuition fee is refundable until August 1, 2017.

Child's Name _____ Birth Date _____
Last First Middle

Child's Nickname if you want your child to learn to spell nickname instead _____ M ___ F ___

Street Address _____ City & ZIP _____

Phone _____ E-mail address _____

Mother's/ Guardians Name _____ Occupation _____

Business Name and Phone _____

Father's/ Guardian's Name _____ Occupation _____

Business Name and Phone _____

Marital Status (*circle one*) Married Divorced Separated Single

Child resides with _____Both _____Mother _____Father _____Other

Please list names and birth dates of other children in family _____

Church Affiliation _____

(You need not be a member of Christ Lutheran Church to register.)

How did you hear about LLP? _____

I hereby apply for admission of my child to Little Lamb Preschool. I understand the financial policies of the school regarding monthly tuition payments, and pledge my cooperation in meeting this obligation. I will read and follow the guidelines of the LLP handbook, which will be given to me the first week of school.

Signature _____ Date _____

Little Lamb Preschool does not discriminate on the basis of race, color, national or ethnic origin.

It is our goal to provide a welcoming, safe and nurturing educational environment for every child. In order to help us know your child better, please fill out the following questions:

What does your child particularly enjoy?

What does your child dislike or fear?

What do you expect from preschool for your child?

Health Information:

***Does your child have any food allergies? If yes:**

Please list:

What reaction does he/she have?

***Does your child have any other allergies? If yes:**

Please list:

What reaction does he/she have?

***Does your child have any special health considerations? (Such as asthma, eczema, etc). If yes:**

Please describe:

***If yes to any of the above, would you want/need us to keep emergency medication at school? We will provide you with a Medical Form to have signed by your physician.**

Should your child's physical activities be limited in any way?

Is there anything else you would like us to know about your child?