

**FAITH LUTHERAN PRE-SCHOOL
ENROLLMENT APPLICATION FOR 2012-2013 SCHOOL YEAR**

Date _____ Phone # _____

Child's Full Name _____ Sex: M/F _____ Child's Birth Date _____

Street Address _____ City _____ Zip _____

Parent's Full Name(s) _____

E-mail Address _____ Cell# _____ Work# _____

Church Affiliation _____ Baptism Date _____ Ethnic Origin _____

**Please ck* ___ if your child is being considered for the Derby Preschool/Model Student Program

CLASS DESIRED: (Please circle one)

FOUR YEAR OLD CLASSES

**M/W/F A.M. (9-11:30)
4 yrs. old by 9/1/12
\$105.00/month**

**M/W/F P.M. (12:30-3:00)
4 yrs. old by 9/1/12
\$105.00/month**

**M-F P.M. (12:30-3:00)
4 yrs. Old by 9/1/12
\$185.00/month**

THREE YEAR OLD CLASSES

**T/Th A.M. (9-11:30)
3 yrs. old by 9/1/12
\$80.00/month**

**T/Th P.M. (12:30-3:00)
3 yrs. old by 9/1/12
\$80.00/month**

I hereby give permission for Faith Lutheran Preschool to release my phone # **(yes/no)** address **(yes/no)** E-mail address **(yes/no)** for the *SCHOOL DIRECTORY*. **Parent's Signature** _____

AUTHORIZATION FOR PICKING UP CHILD

The following persons are authorized to pick up my child from **FAITH LUTHERAN SCHOOL**.

1. _____
(NAME & PHONE NUMBER)

2. _____
(NAME & PHONE NUMBER)

3. _____
(NAME & PHONE NUMBER)

4. _____
(NAME & PHONE NUMBER)

How did you hear about our school? _____

****Please return this application with your \$65.00 *NON-REFUNDABLE* enrollment fee to the pre-school.**

For more information, please call: School Office @788-1715

TUITION PAID IN FULL – PRE-PAY DISCOUNTS

Paid by May 1 – 4%
Paid by June 1 – 3%
Paid by July 1 – 2%

OFFICE USE ONLY

Enrollment Fee Paid: date _____ ck # _____

Classroom: #116 or #117 Teacher _____