Holy Cross Lutheran Preschool Registration 2023-2024

To enroll in the preschool program, your child must be 3 years old before August 1, 2023, for the 3 year old class, or 4 years old before August 1, 2023, for the 4 year old class. ALL CHILDREN MUST BE POTTY TRAINED. Please complete the registration form and return it to the director. The registration fee must accompany this application, and is NON-REFUNDABLE unless Holy Cross Preschool is unable to accept this application.

| CHILD'S | NAME | | NAME CHILD GOES BY | | | | | |
|---|-----------------------------------|----------------------|--------------------|--------------|-----------|--|--|--|
| воу | Y GIRL BIRTHDATE BAPTISM DATE | | | | | | | |
| STREET | ADDRESS_ | | | | | | | |
| CITY | | STATE | ZIP | HOME PHON | E | | | |
| FATHER'S NAME | | | (| CELL PHONE | | | | |
| E | EMAIL | | | | | | | |
| , | ADDRESS (if d | ifferent from child) | | | | | | |
| MOTHE | IOTHER'S NAME CELL PHONE | | | | | | | |
| E | EMAIL | | | | | | | |
| , | ADDRESS (if different from child) | | | | | | | |
| OTHER ADULTS IN THE HOME: | | | | | | | | |
| NAME: | | | RELATIONSHIP | | | | | |
| ı | NAME: | | | RELATIONSHIP | | | | |
| SIBLING | S IN THE HO | ME: | | | | | | |
| 1 | NAME: | BIRTHDATE | | NAME: | BIRTHDATE | | | |
| ı | NAME: | BIRTHDATE | | NAME: | BIRTHDATE | | | |
| PREVIOUS GROUP OR PRESCHOOL EXPERIENCE: | | | | | | | | |
| | | | | | | | | |
| CHURCH FATHER ATTENDS | | | | | | | | |
| CHURCH MOTHER ATTENDS | | | | | | | | |
| SCHOOL YOU PLAN TO SEND YOUR CHILD TO FOR KINDERGARTEN: | | | | | | | | |
| | | | | | | | | |

| | BETTER UNDERSTAND YOU S YOUR CHILD MAY EXPERI | UR CHILD, PLEASE LIST ANY DENCE: | DISABILITIES, |
|--|--|--|---|
| HOW DID YOU HEAR AB | BOUT OUR PROGRAM? | | |
| REGISTRATION FEE | : \$140 Due with Reg | istration Form. Non-refunda | able. |
| REGISTER FOR PRE | SCHOOL: Put an X on | the line to select the class | s and time. |
| AM Preschool 8:3 | 30 – 11:30 | PM Preschool 12:30 - 3:30 |) |
| 3 Year Old AM T/Th Class | s \$175/month | We are Interested in 3 Year Old If it becomes | d PM T/Th Class available |
| 4 Year Old AM M/W/F Cla | ass \$215/month | 4 Year Old PM M/W/F Class \$2 | 215/month |
| REGISTER FOR EXT | | Circle the days in each bo ition times for which you a | |
| Before School Care 7:00 – 8:30am \$20/month x # of days/week | Half Day Extended Ed 8:30am - 12:30pm OR 11:30 am – 3:30 pm \$40/month x # of days/week | Full Day Extended Ed 8:30am - 3:30pm \$70/month x # of days/week | After School Care 3:30-6:00pm \$30/month x # of days/week |
| M T W TH F | M T W TH F | M T W TH F | M T W TH F |
| CALCULATE MONTH | HLY TUITION: | | |
| 3s Preschool Tu | uition \$175/month | | ······ |
| 4s Preschool Tu | uition \$215/month | | ······ |
| Before School (| Care \$20/month x d | lays/week attending | |
| Half Day Extend | ded Education \$40/month | n x days/week attendin | g |
| Full Day Extend | ded Education \$70/month | x days/week attending | g |
| After School Ca | are \$30/month x day | ys/week attending | |
| Please make checks pay | yable to Holy Cross Luthera | an Preschool. Monthly Tot | al \$ |
| AS PARENTS, WE PLED | | F THE PROGRAM OF CHRISTIA | |
| SIGNATURE OF PARENT | T/GUARDIAN | DA ⁻ | TE |
| | NG, AND ORDERLY CHRIST | THAT WE WILL PROVIDE A POS IAN ENVIRONMENT IN WHICH | |
| PRESCHOOL DIRECTOR | ₹ | DA1 | ΓE |