CHRIST THE KING LUTHERAN PRESCHOOL (Established in 2011) 1305 Pine Avenue Snohomish, WA 98290 (360) 348-8207 contact@ctksnohomishpreschool.org http://www.ctksnohomishpreschool.org

REGISTRATION – 2012/2013 (Updated 1/18/12)

Thank you for inquiring about Christ the King Lutheran Preschool. We are proud to continue Prince of Peace's 38-year legacy of preschool education in September of 2011. To register your child, please complete this form and return it along with the \$65.00 non-refundable registration fee to the above address. Make checks payable to Christ the King Preschool.

MISSION: Continuing Christ's work with preschool children and their families.

STRATEGIES: As an outreach of Christ the King Lutheran Church, living out the love and graciousness of Jesus, we seek to provide an affordable, high quality, age appropriate experience to assist children in their spiritual, physical, social and emotional development.

REQUIREMENTS:

Age: We require that your child be age 3 or 4 by August 31st of the current year. Toilet Trained: All children must be self-sufficient in the bathroom upon starting school (no pull-ups or diapers.)

For office use only: \$65.00 Non-refundable 2011/2012 Registration Fee Received?

 \Box Yes

□ No Check #

ENROLLMENT INFORMATION

Please make your selection ("x") from the list below, as to your preferred class: NOTE: 3-Day meet MTW 2-Day meet Th, F

Four-year olds

□ 3-Day 9-11:30am

□ 3-Day 12:15-2:45pm

□ Currently/sibling enrolled □ New Enrollment How did you hear about us? □ Check here if you <u>DO NOT</u> want your telephone number/address included on a class list (provided to parents upon request)

Three-year olds

□ 2-Day 9-11am

CHILD INFORMATION

Child's Name	M/	F Birthday
Address	_City	Zip Code:
Phone #()		

PARENT INFORMATION

Father's Name			
Work #()	C	Cell ()	
Address (if different)			
Employer			
Mother's Name			
Work #()	C	Cell ()	
Address (if different)			
Employer			
FAMILY INFORMATION			
Names and ages of other children in the fami	ily:		
Please list any other persons living with the c	child and their relationship	(if any) to the child:	
Member of a church? □ Yes □ No If Yes	s, name of church:		
PERSONAL HISTORY			
Previous group interaction, preschool experi	ence (including speech ther	apy)? 🗆 Yes 🗆 No	
If so, where and when?			
Child's physician (hospital preference):			
Name	Phone()	Hospital	
Day Care Provider or Babysitter:		PHONE()	
List below the name and phone number of tw emergency when you cannot be reached: (The a valid drivers license.)			
NAME	PHONE()	CELL(_)
NAME	PHONE()	CELL(_)
Are there any special health, (allergies, pleas □ Yes □ No If Yes, please explain:	e describe and note school j	policy) or learning prob	olems?

I understand that every effort will be made to contact the parents if (child's name) ______ needs medical or surgical treatment. However, if it is impossible to do so, I hereby give my permission to the emergency physician to secure proper treatment for my child.

Parent/Guardian Signature_	
Date Signed	

CHRIST THE KING LUTHERAN PRESCHOOL 2012/2013 TUITION POLICY

Upon enrolling your child in Christ the King Lutheran Preschool, please be certain that you understand and agree to the following Tuition Policy.

- 1. A non-refundable registration fee of \$65.00 is required upon enrollment.
- 2. Tuition is due on the first day of each month. It is to be paid directly to the **Main School Office** located at Christ the King Lutheran Church, 1305 Pine Avenue Snohomish, WA 98290. You are given a ten-day grace period. Please make checks payable to Christ the King Preschool. To pay with credit/debit card via PayPal, follow the "Make a Payment" link on our website (www.ctksnohomishpreschool.org).
- 3. Any tuition not received in our office by the 10th of each month will be assessed a \$20.00 late charge. A 30-day delinquency shall constitute grounds for dropping the child from class pending a review. A charge of \$20.00 will be made on all NSF (non- sufficient funds) checks. If your check is re-deposited by the bank, a \$6.00 fee will be added to your account.
- **3.** May's tuition is collected with your first month of school's tuition. If your child needs to withdraw prior to end of May, we will refund unused tuition <u>only</u> if the office is given a <u>two-week</u> notice by the parent.
- 4. Payment envelopes will be provided for your convenience, for those who do not pay online. We do not provide monthly statements.
- 5. The monthly tuition is an average of all the school days for the entire nine months, September May. It takes into consideration start/finish days, holidays, in-service days, and school closures due to inclement weather and emergencies.

Registration Fee (<u>non-refundable*</u>)	\$65.00	\$65.00	
	<u>2 dav</u>	3 day	
September & May	174.00	236.00	
October	87.00	118.00	
November	87.00	118.00	
December	87.00	118.00	
January	87.00	118.00	
February	87.00	118.00	
March	87.00	118.00	
April	87.00	118.00	
May (prepaid)	-0-	-0-	
Total Yearly Tuition	\$783.00	\$1062.00	

TUITION SCHEDULE

*Classes may be cancelled due to low enrollment. If this happens, we will work with you to find a suitable replacement. If there is no class available that meets your needs, you will be refunded your registration fee.

PLEASE SIGN: I have read and agree to follow the TUITION POLICY as outlined above.

Signature_____

__Dated_____

Notice of Nondiscriminatory Policy As To Students

Christ the King Lutheran Preschool admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.