

# St. John Lutheran Early Childhood Center

## Fall Preschool Program Pre-Registration Form

### 2022-2023

#### Student Information

Child's name \_\_\_\_\_ Today's Date \_\_\_\_\_

Child's date of birth \_\_\_\_\_ (circle) Male/Female Home # \_\_\_\_\_

Mother/Guardian \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Father/Guardian \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Mother/Guardian email \_\_\_\_\_ Father/Guardian email \_\_\_\_\_

Address \_\_\_\_\_

City, State, and Zip \_\_\_\_\_

**Will there be siblings in  
2022 - 2023 program?** Yes or No

Name _____	DOB _____
Name _____	DOB _____
Name _____	DOB _____
Name _____	DOB _____
Name _____	DOB _____

#### **Religious Affiliation**

Please circle one below

SJ – St. John  
MS – Missouri Synod  
OL – Other Lutheran  
NL – Non-Lutheran  
NC – No Church Member

#### **Ethnic Origin**

Please circle one below

1 - American Indian  
2 - Asian  
3 - African American  
4 - Hispanic  
5 - Caucasian  
6 - Other

Church Family Attends \_\_\_\_\_

The registration fee will be required to guarantee your admittance. **Final Registration is April 25-April 29, 2022 at which time all online ECC Student Information forms are due.** Monthly tuition is equally divided into 9 payments. September being the first month tuition is due. If you decide to decline your admittance no money will be refunded. **NO EXCEPTIONS** will be considered. Any changes made to your schedule, upon availability, will require an additional \$25.00 fee. This fee must be paid in full before any change will be made.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

#### **For Office Use Only:**

18 months	T/TH	MWF	M-F (Must be 18 Months by September 1)
2 years	T/TH	MWF	M-F
3 years	T/TH	MWF	M-F
4 years	T/TH	MWF	M-F
Bridge			M-F

**Deposit received** \_\_\_\_\_ **Check #** \_\_\_\_\_

**T-TH**

**MWF**

**M – F**

**Bridge**

**Age** \_\_\_\_\_

**ST. JOHN LUTHERAN EARLY CHILDHOOD CENTER**  
**FALL PRESCHOOL PROGRAM**  
**PRE-REGISTRATION FINANCIAL CONTRACT**  
**2022-2023**

CHILD'S NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

Siblings in Program: **YES NO** Member of St. John Lutheran Church or Cypress Chapel: **YES NO**  
 Name of Siblings: \_\_\_\_\_

**Program Age:** \_\_\_\_\_ **Eighteen Months** \_\_\_\_\_ **Two** \_\_\_\_\_ **Three** \_\_\_\_\_ **Four** \_\_\_\_\_ **Bridge**

**Stay 'n' Play:** \_\_\_\_\_ **AM** \_\_\_\_\_ **PM** \_\_\_\_\_ **Two Days** \_\_\_\_\_ **Three Days** \_\_\_\_\_ **Five Days**

**Specify Stay 'n' Play Days (Please Circle):** **MORNING:** **Monday** **Tuesday** **Wednesday** **Thursday** **Friday**  
**AFTERNOON:** **Monday** **Tuesday** **Wednesday** **Thursday** **Friday**

**Fees due at PRE-REGISTRATION (Today):**

**Program Days:** \_\_\_\_\_ **Two Day** \_\_\_\_\_ **Three Day** \_\_\_\_\_ **Five Day** \_\_\_\_\_ **Bridge**

**REGISTRATION FEE** **\$345.00\*\*** **\$380.00\*\*** **\$460.00\*\*** **\$520.00\*\***

**MAT FEE (optional)** \_\_\_\_\_

**FOR OFFICE USE ONLY:**

**Monthly Fees (September 2022 through May 2023) are as follows:**

<b>Monthly TUITION</b>	<b>\$350.00</b>	<b>\$485.00</b>	<b>\$735.00</b>	<b>\$735.00</b>
<b>Church Member/Sibling Discount (if applicable)</b>	- _____	- _____	- _____	- _____
<b>Contracted Stay 'n' Play</b>	_____	_____	_____	_____
<b>TOTAL DUE each month</b>	<div></div>	<div></div>	<div></div>	<div></div>

Fees are due on the first of each month. Tuition is considered late if not paid by the 10<sup>th</sup> of the month and a late fee of \$30 per child will be assessed to your account. Please note the following exception: If the 10<sup>th</sup> of the month falls on a weekend, late fees will not be assessed until after the first weekday. The yearly payment schedule is as follows:

**Tuition Due On:**

Sep 01  
Oct 01  
Nov 01  
Dec 01  
Jan 01  
Feb 01  
Mar 01  
Apr 01  
May 01

**Late Fee Assessed On:**

Sep 11  
Oct 11  
Nov 11  
Dec 11  
Jan 11  
Feb 11  
Mar 11  
Apr 11  
May 11

\*\*The registration fee will be required to guarantee your admittance. If you decide to decline your admittance, no money will be refunded. **NO EXCEPTIONS** will be considered. Any changes made to your schedule, upon availability, will require an additional \$25.00 fee. This fee must be paid in full before any changes will be made. Monthly tuition is equally divided over a 9-month period, September being the first month tuition is due. A late fee of \$25.00 per child will be assessed after the 10<sup>th</sup> of each month. I understand that special requests for teachers and other students will not be honored.

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_