

# New Hope Lutheran Preschool

## Registration/Enrollment



Check the one you prefer your student to be enrolled in:

- 3/4 year old morning class  3/4 year old afternoon class  4/5 year old morning class  4/5 year old afternoon class  
will be offered after morning class is filled will be offered after morning class is filled

Child Last Name \_\_\_\_\_ First Name \_\_\_\_\_ sex: M or F

Refer to my child as (nickname) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Month/day/year

Name: Father/Mother/or Legal Guardian \_\_\_\_\_

Father's Address \_\_\_\_\_

Address City \_\_\_\_\_ state \_\_\_\_\_ zip code \_\_\_\_\_

Mothers Address \_\_\_\_\_

Address City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

This child lives with \_\_\_\_\_ at \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Father's (or legal guardian) phone number \_\_\_\_\_

Work \_\_\_\_\_ cell \_\_\_\_\_ home \_\_\_\_\_

Mother's (or legal guardian) phone number \_\_\_\_\_

Work \_\_\_\_\_ cell \_\_\_\_\_ home \_\_\_\_\_

Email address \_\_\_\_\_

Please list your child's siblings and their ages: \_\_\_\_\_

\_\_\_\_\_

My child has participated in or been referred to (check all that apply):

- First Steps
- Occupational Therapy
- Speech Therapy
- Behavioral Therapy

If any of the above were checked please describe and list dates of involvement: \_\_\_\_\_

\_\_\_\_\_

Does your child have any medical or physical issues that the preschool teacher should be aware of? \_\_\_\_\_

\_\_\_\_\_

Does your child have any allergies? \_\_\_\_\_ if so please list \_\_\_\_\_

\_\_\_\_\_

Do you currently attend a church? \_\_\_\_\_ If so where? \_\_\_\_\_

Referred by \_\_\_\_\_



Thank you for considering New Hope Lutheran Preschool! We are so excited to begin enrollment for our 2021-2022 Preschool year! Listed below are the classes and times available for this fall. Please return the registration form and non-refundable registration fee to the address below. Your child's registration will not be considered complete until the full registration fee and the attached form is complete.

### Our 4 and 5 year old class

*\*Meets Monday through Friday*

9:00-11:30am

Or

12:30-3:00pm

**(Afternoon class will only be offered after morning class is filled)**

*\*Children must be 4 by August 1 and potty trained to enroll in class*

**\*Early registration fee: \$70.00**

**\*Registration fee after July 1: \$85.00**

**\*Tuition: \$120.00 per month**

### Our 3 and 4 year old class

*\*Meets Monday through Wednesday*

9:15-11:45am

Or

12:30-3:00pm

**(Afternoon class will only be offered after morning class is filled)**

*\*Children must be 3 by August 1 and potty trained to enroll in class*

**\*Early registration fee: \$70.00**

**\*Registration fee after July 1: \$85.00**

**\*Tuition: \$100.00 per month**

Please feel free to contact our director, Kari Wallis at 450-7563 or the church office 622-7954 for further details. Please return fee and the attached form to:

**Kari Wallis**

**New Hope Lutheran Preschool**

**8824 N State Road 1 Ossian, IN 46777**



