Grace Lutheran Preschool & Kindergarten

OPEN Registration for 2020 – 2021 School Year

- Priority registrations (returning students, siblings, church members) will be reviewed starting 2/4/20 in order of receipt.
- Open registrations will be accepted beginning 2/4/20.
- All registrations will be marked with the date they are received.
- Open registrations will be reviewed beginning on 2/11/20.

Child's name_____
last first middle nickname

Address_____
street apartment city state zip code

Place of birth _____ Child's date of birth ___/___/___ Female Male

Child lives with: Mother Father Both Other: _____

Party responsible for payment:_____

PARENT/GUARDIAN INFORMATION (if address is not the same as above, please include address):
Mother Other guardian *(please specify)* _____

_____ Employer _____
Last Name First Name

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

PARENT/GUARDIAN INFORMATION (if address is not the same as above, please include address):
Father Other guardian *(please specify)* _____

_____ Employer _____
Last Name First Name

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Language(s) spoken at home_____ *If other than English, indicate the child's English fluency in the English language (circle one): fluent moderate basic does not speak English*

Has your child attended preschool before? If so, where? _____

Reason for change: _____

Is your child able to verbally communicate his/her needs? (circle one) Yes Sometimes No

Describe your child's communication with you (ex.: gestures, one word responses, full sentences):_____

_____

Describe how your child reacts to new situations: _____

_____

Describe how your child interacts with children his/her own age: _____

_____

What is your main goal for your child while attending our school? _____

_____

Does your child have developmental / educational diagnoses (speech, autism, CIU)? _____

If so, please list any agencies with which you have had contact (or services): _____

Sign here _____ *to allow us to exchange information with the agencies named so we can provide the best and most appropriate educational services for your child. All information will be held in confidence.*

2020-2021 REGISTRATION INFORMATION for Grace Lutheran Preschool & Kindergarten

Please check the following choices in the order of preference (1st, 2nd, 3rd). A **$50.00 non-refundable registration fee** is due to Grace Lutheran Church with this form.

Child's name: _____

My child's age on August 31, 2020 will be: ____ years ____ months **My child's date of birth is: ___/___/___**

Class Options, Days, and Times		**Tuition**

Morning Preschool Classes*
For children **ages 2 years & 7 months by September 1, 2020 or age 3 or 4 by August 31, 2020.**

_____**2- Day Enrollment**	Tuesday/Thursday, 9 - 12:00 pm	$160/month
_____**3- Day Enrollment**	Monday/Wednesday/Friday, 9 - 12:00 pm	$239/month
_____**5- Day Enrollment**	Monday-Friday, 9 - 12:00 pm	$399/month

*Based on enrollment, the 5-day classes may also include children who attend two or three days per week.

Jr. Kindergarten Class for children **5 years of age on or before December 31, 2020.**

_____**5- Day Enrollment**	Monday-Friday, 9 - 12:00 pm	$399/month

Kindergarten Prep Class for children **5 years of age on or before September 30, 2020.**

_____**5- Day Enrollment**	Monday-Friday, 9 - 12:00 pm	$399/month

Afternoon Enrichment Classes for children **3 years of age on or before August 31, 2020.**

_____**2-Day Enrichment**	Tuesday/Thursday, 12 - 2:30 pm	$134/month
_____**3-Day Enrichment**	Monday/Wednesday/Friday, 12 - 2:30 pm	$200/month
_____**5-Day Enrichment**	Monday-Friday, 12 - 2:30 pm	$334/month

How did you learn about Grace Lutheran Preschool & Kindergarten?

_____

_____

I understand that I am registering my child to attend Grace Lutheran Preschool & Kindergarten for the 2020-2021 school year and that the final placement of my child is at the discretion of Grace Lutheran Preschool and Kindergarten. Admission to Grace Lutheran Preschool & Kindergarten shall be made without regard to race, color, religious creed, disability, ancestry, national origin, age, and/or sex.

Signature of Parent or Guardian:_____
Date:_____ **$50 reg. fee enclosed**_____
(non-refundable)

*205 South Garner Street, State College, PA 16801 * (814) 238-8110 * www.glcpapreschool.org*