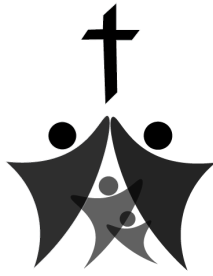


33 Bay Shore Road
Deer Park, New York 11729
(631) 242-6612



ascensionluthprek@gmail.com
www.ascensionlutheran.org

Ascension Preschool

AFTERNOON ADVENTURES REGISTRATION FORM 2018– 2019 School Year

Child's Name _____ Birth Date _____ Age _____
Male _____ Female _____
Parent or Guardian Name _____ Parent or Guardian Name _____
Address _____ Address _____
City & Zip _____ City & Zip _____
Home Phone _____ Home Phone _____
Work Phone _____ Work Phone _____
Cell Phone _____ Cell Phone _____
Email _____ Email _____

2018/2019 Tuition Fees

\$75-Monthly for one day a week
\$145-Monthly for two days a week
\$205-Monthly for three days a week
\$245-Monthly for four days a week
\$275– Monthly for five days a week
*\$25 registration fee for students who do not attend the preschool program

Please circle desired class/ class

days:

Monday : Fun with Fitness
Tuesday: Yoga
Wednesday: Creative Kids
Thursday: Creative Movement
Friday: Cooking

Application Payment:

Date Paid _____ Amount Paid _____ Check _____ Cash _____

List all people who can pick/ drop off your child (Please note that ID is Required)

Is there anyone your child cannot be released to: _____

***Proper documentation needed**

Please initial each of the following statements indicating that you understand and will adhere to the listed policies below:

___ For a child to be enrolled, a \$25 non-refundable registration fee must be paid.

___ Monthly tuition is due by the 1st of each month unless the 1st falls on a day school is not in session.

___ Enrollment at Ascension Preschool is granted on a first come, first served basis. A wait list is maintained when enrollment limits are reached.

**** Do You Give Permission for your child's name to be distributed as a Class List to other class members; with the understanding that it is used for school purposes only?**

Yes _____ No _____

****Do you give permission for photos/ videos *without names* to be used for promotional purposes in social media and print?**

Yes _____ No _____

Parent signature _____ Date _____

Please print your name _____