

Application for Enrollment 2019-2020
Let Me Shine Christian Playschool and Preschool
 1070 S. Foothill Dr. 84108
 801-583-6400

Please indicate your enrollment choice for playschool or preschool below. *Class grade level is determined by your child's age as of September 1, 2019.* School begins at 9:00am and concludes at 12:00pm. Optional "Morning Bunch, and Lunch Bunch" programs are available for a small fee. The school office has details.

General enrollment begins on February 1, 2019. Applications, however, are accepted on a continuous basis and may be turned in before this date. Our classrooms have limited seating but we make every effort to accommodate your request for admission. Admission is based upon order received so please plan accordingly.

The 2019-2020 application fee is \$100 and is non-refundable. *A non-refundable deposit of \$30 must accompany this form to activate your request and is good for the 2019-2020 school year only.* Once you are notified of acceptance, your balance of \$70 is due immediately to reserve your seat.

Playschool		Preschool / Pre-kindergarten	
18 Month	<input type="checkbox"/> M / W	3 Years (Must be potty trained)	<input type="checkbox"/> M / W / F
	<input type="checkbox"/> T / Th		<input type="checkbox"/> T / Th
2 Years	<input type="checkbox"/> M / W / F	4 Years (Must be potty trained)	<input type="checkbox"/> T / Th
	<input type="checkbox"/> T / Th		<input type="checkbox"/> M / W / F
			<input type="checkbox"/> T / W / Th
			<input type="checkbox"/> Monday through Friday

Child's Full Name _____ Boy Girl

Birth Date _____ Age on September 1, 2019 _____ Telephone () _____

Address _____ City _____ Zip _____

Race/Ethnicity:

African American Asian Caucasian/White Hispanic Native American

Full Name of Parent or Guardian

Best Email Address _____

Mother _____

Employed by _____

Work Phone _____

Occupation _____

Cell Phone _____

Father _____

Employed by _____

Work Phone _____

Occupation _____

Cell Phone _____

Guardian's Name (if different from above) _____

Relationship to Child _____

Siblings

Name _____ Age__ School_____

Name _____ Age__ School_____

Name _____ Age__ School_____

Church Affiliation _____ Church you attend _____

Has child been baptized? Yes - date of Baptism: ___/___/___ No

Emergency Contacts

Name	Relationship	Phone

Physician (To be called in an emergency) _____ Phone () _____

Clinic or Address _____

Please list any allergies or conditions that your child may have

Is your child currently taking any medication? Yes No

If "yes," please list _____

What languages are spoken at home? _____

Has your child been diagnosed with any learning disabilities or does your child have an Individual Education Plan (IEP)? Yes No If "yes," please explain on an additional sheet.

How did you learn about **Let Me Shine Christian Playschool and Preschool?**

Friend _____ Advertisement (sign/poster) Church bulletin Other _____

Please read and sign...

I hereby agree to comply with the rules and regulations of Let Me Shine Christian Playschool and Preschool regarding fees, attendance, health, clothing and other items specified in the Parent's Handbook.

I authorize our name, number, address and email to be printed in a school student directory.

Yes No

Signed _____
Mother or legal guardian

Date _____

Signed _____
Father or legal guardian

Date _____

<i>For Office Use only</i> Check# _____ Amount _____ Date & Time Received _____
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