

How did you hear about Immanuel Preschool?

Please fill in ALL spaces. Thank you!
 (This form is not used for TOT Class)

2022-2023

Immanuel Lutheran Preschool
5211 Carpenter St. Downers Grove, IL.
APPLICATION / TUITION AGREEMENT

Child's name _____
 First Last

Birth Date (01/01/1111) _____ Current Age _____

Parent's names _____
 (father) / (mother)

Home Address _____
 Street City Zip

Phone (____) _____ Where is your families
 current church membership? _____ / _____
 (father's) (mother's)

Parent's Occupation _____

Father's _____ Mother's _____

PRESCHOOL ENROLLMENT OPTIONS:

Please indicate your choices by placing # **1 and 2** in the spaces provided below.

1st	Class Offerings	Class Time	Cost/Month
	2.5 year old Preschool: 2.5 by September 1, 2022		
	1 class: Tuesdays (ORANGE)	11:45 am – 1:15 pm	\$100/month
	2 classes: Tuesday/Thursday (ORANGE)	11:45 am – 1:15 pm	\$160/month
	3 year old Preschool: 3 by September 1, 2022		
	2 classes: Tuesday/Thursday AM (GREEN)	9:00 am – 11:30 am	\$225/month
	3 classes: Monday/Wednesday/Friday AM (RED)	9:00 am – 11:30 am	\$265/month
	4 year old Preschool: 4 by September 1, 2022		
	2 classes: T/TH (EXTENSION ONLY)	11:30 am – 1:00 pm	\$160/month
	4 classes: M – TH (PRESCHOOL)	8:30 am – 11:30 am	\$355/month
	5 classes: M – F (PRESCHOOL + NATURE)	8:30 am – 11:30 am	\$410/month
	6 classes: M–TH (PRESCHOOL + EXTENSION)	8:30 am – 11:30 am (M/W) 8:30 am – 1:00 pm (T/TH)	\$435/month
	7 classes: M – F (PRESCHOOL + NATURE + EXTENSION)	8:30 am – 11:30 am M/W/F 8:30 am – 1:00 pm (T/TH)	\$465/month
	4 year old Transitional Kindergarten: 5 by December 31, 2022		
	6 classes: M-F (TRANSITIONAL KINDERGARTEN)	8:30 am – 1:00 pm	\$575/month

IMPORTANT!
 What name should be on his/her nametag? This is
 the name they will learn to write.

Name

Email address: Please print clearly!

*Important information needed to
 know for child's placement in a
 certain class.*

A **\$150.00** non-refundable registration/material fee should be returned with these two forms. This is not applied toward the tuition. Registration fees will be applied to the child's Brightwheel account.

Tuition is based on a yearly amount broken down into 9 installments. *All payment plans begin August 1.* More information is found in the handbook. You will receive the necessary forms to complete the enrollment at the orientation in August. Please make sure you have a physical examination form to be completed by a doctor during the summer months. **CURRENTLY ENROLLED CHILDREN DO NOT NEED TO GET ANOTHER PHYSICAL. PHYSICALS ARE GOOD FOR TWO YEARS!**

 Date Signature of Parent or Guardian

----- For school use only -----

Approved _____ Date _____
 (Director's Signature)

Immanuel Lutheran Preschool
5211 Carpenter St.
Downers Grove, IL

RELEASE FORM
2022-2023

I have read the Immanuel Lutheran Preschool Handbook and have read and will comply with the policies of Immanuel Lutheran Preschool. Our handbook is online on the preschool website. You may also ask for a hard copy of the handbook.

I agree that photographs or videotapes of my child may be used for classroom use or publicity (including website, blog or social media platforms) for Immanuel Preschool. These are often of group activities. No names will be used.

I also agree that my child may receive religious instruction at Immanuel Lutheran Preschool.

I agree and herewith grant permission that my child may be taken on neighborhood walks in conjunction with the educational program at Immanuel. This includes places such as the Fishel Park, the post office, the fire station, and the train station, etc.

I further agree and grant permission that my child may be taken on planned field trips. Special notes will be sent home when out of the area field trips are planned to notify the parent or legal guardian of the field trip in advance. I reserve the right to withdraw my permission for an individual trip by notifying Immanuel Lutheran Preschool staff in advance of the planned field trip.

I agree that Immanuel Lutheran Staff may administer limited first aid to my child and may contact me, my child's doctor, or local emergency services, if required.

Child's Full Name

RELEASED BY:

Signature

by: _____
(PLEASE PRINT) Parent or Legal Guardian

Address

City, State, Zip Code

Date

-----**For school use only**-----
Accepted by Immanuel Lutheran Preschool, Downers Grove, IL.

Approved by _____ Date _____