

Office Use Only

(3s & 4s)

3 days _____

(4s)

4 days _____

**Preschool Registration Form
Gethsemane Lutheran Preschool**

2017-2018

11560 SE Market
Portland, OR 97216
(503)256-1835

Email: gethsemanepreschool@hotmail.com

Please fill out this application completely. Accurate information is necessary so that we may best serve your child. It is your responsibility to notify us immediately of any changes in employment, residence, or phone numbers.

Child's Information**Name of Child:** _____ **Date of Birth:** _____ (Must be 3 or 4 by Sept 1)**Nickname (if used):** _____ **Sex:** M F**Address:** _____ **City:** _____ **Zip:** _____**Home Phone Number:** _____ **E-mail Address:** _____

*E-mail will not be sold or shared with any other organization.

____ Yes ____ No

I would like my e-mail address to be used for notification of GLC activities and programs, e.g. VBS, Sunday School, etc.

Parent Information**Mother's Name:** _____ **Cell/Pager #:** _____**Occupation:** _____ **Work Phone:** _____**Address & Phone # (if different from child's):** _____**Father's Name:** _____ **Cell/Pager #:** _____**Occupation:** _____ **Work Phone:** _____**Address & Phone # (if different from child's):** _____**With whom does the child reside?** _____**Office Use Only:****Date registered:** _____ **Check #** _____ **Amount:** _____**Tuition Paid:****Date Paid:** _____ **Check #** _____ **Amount:** _____

General Information

General health/allergies: Please give any information concerning your child which will be helpful in his/her experience in preschool (such as play, eat/sleep habits, special diets, fears, likes/dislikes, etc.)

Other children in household:

Name: _____ Age: _____ Sex: _____

Name: _____ Age: _____ Sex: _____

Name: _____ Age: _____ Sex: _____

Church Affiliation: _____

Recommended to our preschool by: _____

Language

Is English spoken at home? Yes _____ No _____

If no, what language is spoken at home? _____

If no, does your child understand English? _____

Release Information

The following adults have my permission to pick up my child from preschool (other than parents). If you need to have someone pick up your child who is not listed, please send a signed note on that day giving permission for us to release your child to this person. ***We will only release your child to persons for whom you have given your written permission. A phone call will not suffice.***

Name: _____ Phone # _____ Relationship: _____

Name: _____ Phone # _____ Relationship: _____

Name: _____ Phone # _____ Relationship: _____

Name: _____ Phone # _____ Relationship: _____

Signed: _____ (Parent/Guardian) Dated: _____



Fee Information

Registration Fee: \$50 until 6/1/17, \$60 after 6/1/17. This non-refundable fee is due at registration.

Tuition: Please indicate child's class:

Multi-Age (3s&4s)(\$140/month) Tues/Wed/Thurs	_____
Pre K (4s) (\$190/month) Mon/Tues/Wed/Thurs	_____

All classes meet from 9 to 11:30 a.m. each school day unless otherwise indicated.

Regular tuition is due by the 1st of each month. There is a \$10 late fee assessed for any tuition payments made after the 10th of the month. If tuition payment is more than 30 days delinquent, it will be cause for student dismissal. There is a reduction of \$5 per child per month if more than one child from the same household is attending the preschool the same year.

If a child is withdrawn from preschool, two weeks notice is required.

Lunch Bunch is an opportunity for children to remain until 1 p.m. and is available on Tuesday, Wednesday and Thursday. Your child may be signed up on a regular basis or you may sign up as space is available. Children bring their own lunch. **Cost is \$7/day, 11:30 a.m. to 1 p.m. If your child is signed up for lunch bunch but does not attend, you will still be charged \$7 if you fail to remove his/her name from the sign-up sheet by 8:45 a.m. on that day.**

There is a \$25 charge for checks returned due to insufficient funds.

I HAVE READ AND UNDERSTAND ALL THE ABOVE CHARGES:

Signature (Sign Here) X _____

Immunizations: The State of Oregon Health Department requires the preschool to have a current certificate of immunization status form on file for all students. This form needs to be completed prior to your child starting preschool. The forms are available in the preschool office. Students enrolled in the Junior's program and moving into the Senior's have one on file already.

Authorization to seek emergency treatment forms also need to be completed by the start of school in the event of a medical emergency. These forms will be distributed at Open House in the fall.

_____ Please initial at the left if you give your permission for your child to be photographed/videotaped for purposes of bulletin board displays, preschool programs, and on the website. I understand that none of these pictures will be labeled with any child's name.

_____ Please initial at the left if you give your permission for your child's name, address, phone number and parent names to be printed and released to other preschool parents for the purpose of party invitations, etc.

Signature (Sign Here) X _____ **Date:** _____