

St. Paul's Lutheran Preschool

1700 Carridale Street SW

Decatur AL 35601

Phone (256) 353-1353

Date of Application: _____

Desired Start Date: _____

Application for Admission

For NEW STUDENT Enrollment

Please complete both sides of this form completely and legibly. Thank you!

Student Information

Student's Legal Name: _____ Preferred name/nickname: _____
Last First Middle

Date of Birth: ____/____/____ () Male () Female Date of Baptism: ____/____/____ Age as of this Sept 1st _____

Health Concerns: _____ Food/Environmental Allergies: _____

Family Information

Student lives with: (Check all that apply)

- Both parents
- Natural mother
- Natural father
- Natural mother & stepfather
- Natural father & stepmother
- Grandfather
- Grandmother
- Other: _____

Parents are: Married Separated Divorced Widowed Is either parent deceased? Mother Father

Please complete the following information for the parent(s) or guardian(s) with whom the student currently lives.

Parent/Guardian Information: Title: Mr. Mrs. Ms. Miss Other: _____

Name: _____ Spouse: _____

Home Address: _____
Street City State Zip

Cell Phone: _____ Spouse Cell Phone: _____

Occupation: _____ Spouse's Occupation: _____

Email: _____ Spouse's Email: _____

Brothers and sisters and other information about your child

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Favorite Food _____ Favorite Book _____ Favorite toy _____

Favorite Game _____ Pets and their names _____

Ministry Information

Ethnic origin: White ____ Black ____ Mixed ____ Hispanic ____ American Indian ____ Asian ____ Other _____

Home church: _____ How often does your family attend church? _____

Continued on next page – Please complete both sides!

Program Needs

Core Preschool is offered from 8:45-12:45 Monday – Thursday following the Decatur City Schools calendar.

The 2-Day program (available to Toddlers and 2-yr-olds) and the 4-Day program (available for all ages) are billed monthly.

Core Preschool with Extended Care is available with before-care, after-care, and full-time care programs available for all ages;

All forms of Extended Care programs are billed weekly.

Discounts Available

- Families with multiple children: The first child’s tuition will be 100% with a 10% discount on the tuition of siblings.
- Member (or joining) Preschool Families will receive a 25% tuition discount with the Preschool Tuition Covenant.

___ **Summer Program June & July Fee: \$20 Summer Registration Fee due at time of enrollment.**

Choose Core Preschool Only or with Ext Care

Check the rate that fits your schedule of days and hours needed

___ Core Preschool Only:	8:45-12:45	___ \$230 per month	___ \$305 per month	
		<u>2-Days (only Toddlers, Twos)</u>	<u>4-Days (all ages)</u>	
___ Core Preschool w/ Ext Care:	7:00-1:00	___ \$73 per week	___ \$108 per week	<u>5 Days (all ages)</u>
	8:45-5:30	___ \$87 per week	___ \$135 per week	___ \$128 per week
	7:00-5:30	___ \$95 per week	___ \$150 per week	___ \$160 per week
				___ \$181 per week

___ **2024-2025 Program August - May \$100 Fall Registration Fee; *Registration Fee is applied to the Supply Fee; remainder due by July 15**

Choose Core Preschool Only or with Ext Care

Check the rate that fits your schedule of days and hours needed

___ Core Preschool Only:	8:45-12:45	___ \$230 per month	___ \$305 per month	
	Total Registration/Supply Fee:	\$100*	\$125*	
		<u>2-Days (only Toddlers, Twos)</u>	<u>4-Days (all ages)</u>	<u>5 Days (all ages)</u>
___ Core Preschool w/ Ext Care:	7:00-1:00	___ \$73 per week	___ \$108 per week	___ \$128 per week
	8:45-5:30	___ \$87 per week	___ \$135 per week	___ \$160 per week
	7:00-5:30	___ \$95 per week	___ \$150 per week	___ \$181 per week
	Total Registration/Supply Fee:	\$125*	\$150*	\$150*

Payments are billed and paid through the Brightwheel App; once your child’s application is accepted, you will be sent a link to join Brightwheel, continue your enrollment, receive invoices for deposits and payments due, and make tuition and fee payments.

*** \$100 deposit is required to enroll your child in the 2024-2025 Program; this will apply to your Registration/Supply Fee; any remaining Fee will be due by July 15.**

EFT payments through Brightwheel are at no cost to you; credit and debit card payments are charged 2.95% of your payment.

Person responsible for tuition payments: _____

Phone: _____ Email: _____

- I agree to make tuition and fee payments according to my billing plan based on the care I have requested above.
- I understand that I am responsible for checking the Brightwheel App for billing, account balances, and monthly statements.
- I understand that I will pay Brightwheel 2.95% of any credit/debit card charge but that EFT payments are no cost.
- I understand that I will incur a late fee if payments are not made when due.
- I understand that my child will be withdrawn if I continue nonpayment of tuition.

Parent/Guardian’s signature _____ Date _____