

Office Use: \_\_\_ Fee Paid \_\_\_ Payment Number \_\_\_ Processing Number \_\_\_ Full Day \_\_\_ Part Day

**Living Christ Preschool**  
**2021-Summer Camp Application**  
110 North Gammon Road, Madison WI 53717  
608-829-3598



Check box if your child is a returning student

Child's Name \_\_\_\_\_  
(First) (Middle) (Last) (Nickname)

Birthdate \_\_\_\_\_ Age as of 5/25/21 \_\_\_\_\_ Gender \_\_\_ Male \_\_\_ Female

Address \_\_\_\_\_

Paternal Guardian Name \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Paternal Guardian Workplace \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Paternal Guardian Email \_\_\_\_\_

Maternal Guardian Name \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Maternal Guardian Workplace \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Maternal Guardian Email \_\_\_\_\_

**Emergency Contact (other than parents)** \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

**Authorized Pick-Ups:** Other than parents, persons who are authorized to pick up the child, if none, write (none)

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Connection:**

How did you hear about Living Christ Preschool? \_\_\_\_\_

Religious Affiliation \_\_\_\_\_ Your Local Place of Worship \_\_\_\_\_

Would you like to know more about Lutheran Church of the Living Christ? \_\_\_ Yes \_\_\_ No

## Physician/Medical Facility Information

Name of Child's Doctor/Hospital: \_\_\_\_\_

Doctor/Hospital Address: \_\_\_\_\_

Doctor/Hospital Phone Number: \_\_\_\_\_

Describe any allergies or other special physical or emotional needs your child may have:  (N/A)

Yes  No I give consent for emergency medical care or treatment to be used only if I cannot be reached immediately.

Yes  No I have been informed of the number of pets in the center and their degree of contact with the enrolled children. (None at Living Christ)

### Permissions/Authorizations: Of the last 2 items, please choose only 1 as yes, mark the other as no

Yes  No I give consent for my child to participate in field trips and activities during operating hours

Yes  No I give consent for pictures of my child to be used for display in the preschool/church

Yes  No I give consent for pictures of my child to be used advertising purposes (Facebook, Website)

### Choose one of the following options:

Yes  No I give consent for LCP to use Equate Kids SPF 50 sunscreen for my child as needed

Yes  No I give consent for LCP to use parent provided sunscreen \_\_\_\_\_ as needed

**Potty Trained:** If your child is 3+ are they potty trained \_\_\_\_\_ Yes \_\_\_\_\_ Almost \_\_\_\_\_ No

**Home Language:** If English isn't your primary language, what language is spoken at home? \_\_\_\_\_

## Key Fob Policy

- Each family will receive one key fob. If both parents share pick up/drop off responsibilities, please talk to the office about a second fob.
- If the fob number becomes illegible, please stop by the office to have it re-marked.
- When you enroll your child, there will be a \$10 Fob Fee on your first bill. On your child's last day when you return your fob, you will get your \$10 back.
  - This fee will also be applied for any additional fobs your family may ask for.

## Parent Handbook Agreement

\_\_\_\_\_ By initialing this line, I acknowledge that I have read the Living Christ Preschool Parent Handbook found at <https://www.living-christ-preschool.com/student-forms> and that I agree to abide by all policies and procedures stated therein. (Hard copies given upon request)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Enrollment Contract

## Fees: Please initial each line to acknowledge your understanding of these fees

\_\_\_\_\_ An application fee of \$60 is due when this Summer Application is turned in for both summer and fall, applications will not be processed until this fee is paid. These fees are non-refundable.

\_\_\_\_\_ (Fall Enrollment Only) The first month's tuition invoice will be calculated and sent out with confirmation for child's application being processed. This invoice must be paid in order to finalize the child's enrollment and hold their spot. This tuition is non-refundable.

\_\_\_\_\_ Materials from the materials list will be brought in at Open House or on the child's first day of school. If the family chooses, they may instead pay the \$90 materials fee at Open House. If no materials are brought in, the \$90 Materials Fee will be assessed on the next invoice.

## Tuition: Please initial each line to acknowledge your understanding of these policies

\_\_\_\_\_ After the first invoice to confirm your child's spot, invoices will be sent on the first of each month, for a month in advance. (October's invoice will be sent in September). Invoices are due by the 10<sup>th</sup> of the month they are sent out.

\_\_\_\_\_ If tuition is not paid by the 10<sup>th</sup>, there will be a \$20 late fee added. An additional \$20 will be assessed for every 5 days the invoice remains unpaid. If an invoice remains unpaid through the end of the month the child's enrollment may be terminated.

\_\_\_\_\_ Tuition must be paid to hold a child's spot. Long term absences will not be deducted from tuition.

\_\_\_\_\_ A \$10 No Call/No Show fee will be assessed if your child is not to school by 9:00 am and their absence has not been called in to the office, 608-829-3598. You must leave a message, or speak to a teacher.

\_\_\_\_\_ Tuition may be paid via cash, check-made out to Living Christ Preschool, or online. If paying online with a credit card part time families must add a \$15 convenience fee to the invoice total, full time families add \$30. To avoid this convenience fee you may choose to transfer payment from your account to the preschool account.

## Withdrawal: Please initial each line to acknowledge your understanding of these policies

\_\_\_\_\_ If your child will be un-enrolled, we require a 30-day written notice before child will be un-enrolled. Any outstanding invoices must be paid.

\_\_\_\_\_ If a child has needs that cannot be met or is negatively impacting the learning environment and safety of others we reserve the right to terminate the child's enrollment. See Parent Handbook, page 6.

\_\_\_\_\_ At any point, for withdrawal or otherwise, paid tuition and fees are not refundable.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*\*All policies, including these, can be found in greater detail in Parent Handbook*

## Summer Camp Weekly Tuition

<b>Part Day (All 5)</b> <small>Lambs/Lions: 5 hrs or less between 7:00-12:30 Bears/Zebras: 8:30-12:30</small>	<b>Age of Child</b>	<b>Full Day (Minimum 2 Days)</b> <b>7:00-6:00</b>			
<b>Weekly</b>	<b>As of May 25<sup>th</sup></b>	<b>2 Days</b>	<b>3 Days</b>	<b>4 Days</b>	<b>5 Days</b>
\$250	Lambs: 0-1 Year		\$250	\$325	\$400
\$225	Lions: 1-2 Years	\$215	\$235	\$305	\$375
\$200	Bears: 2-3 Years	\$200	\$220	\$285	\$325
\$175	Zebras: 3-5 Years	\$170	\$190	\$245	\$300

**All students will need a parent provided, nutritious lunch.**

**Full Day Students: Please check mark the days you wish to attend**  
 Monday  Tuesday  Wednesday  Thursday  Friday

Please indicate your estimated drop off/pick up time: \_\_\_\_\_

**Please Mark Requested Weeks in the far Right Column**

Weeks	Theme—Mysterious Miracles	Requested
June 1-4	Sounds: Balaam’s Donkey Talks	
June 7-11	Camouflage: Moses before Pharaoh	
June 14-18	Water Cycle: Water from the Rock	
June 21-25	Construction: Walls of Jericho	
June 28-July 2	Sun & Sky: Sun Stands Still	
July 6-9	Fire Safety: Elijah ( <b>Closed July 5<sup>th</sup> for July 4<sup>th</sup> Holiday</b> )	
July 12-16	Transformation: Jesus’ Miracles	
July 19-23	Balance: Walking on Water	
July 26-30	Sight: Jesus Heals the Blind Man	
August 2-6	Multiplication: Feeding the 5,000	
August 9-13	New Life: Easter	
August 16-20	Conversion: Saul Becomes Paul	
<b>School will resume for the 2021-22 Year September 7<sup>th</sup></b>		

**\*\*Families attending at least 6 weeks and paying Summer Tuition in full by April 30th will receive a 10% discount\*\***

\_\_\_\_\_ I will be paying in full for the summer to receive 10% discount (Due by April 30<sup>th</sup>)

\_\_\_\_\_ I will be paying monthly for the weeks I have requested

**Other Fees**

- *Application Fee: \$60 required before application will be processed*
- *Late Pick Up Fee: \$10 per 15 minutes after end of day (12:30 or 6:00)*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application Fee of \$60 is required before application will be processed**

**All Registration Fees and Tuition are NON-REFUNDABLE**

