

2019-20 APPLICATION



OFFICE USE

Reg Fee Rec'd _____

Ck # _____

Contract sent: _____

A NON-REFUNDABLE \$50 APPLICATION FEE, PAYABLE TO LPP, MUST ACCOMPANY THIS APPLICATION.

CHILD'S NAME _____ DATE OF BIRTH _____ AGE _____

PREFERRED NAME _____

PARENT A'S NAME _____ OCCUPATION _____

PARENT B'S NAME _____ OCCUPATION _____

ADDRESS _____

HOME PHONE _____

PARENT A EMAIL _____ PARENT B EMAIL _____

CELL # _____ CELL # _____

EMPLOYER _____ EMPLOYER _____

WORK PHONE _____ WORK PHONE _____

SIBLINGS: NAME _____ DATE OF BIRTH _____

NAME _____ DATE OF BIRTH _____

WHAT PREVIOUS GROUP PLAY EXPERIENCES HAS YOUR CHILD HAD? (SUNDAY SCHOOL, PLAYGROUPS, ETC.)

ANY ALLERGIES OR SPECIAL NEEDS (VISUAL, AUDITORY, SPEECH, MUSCULAR, SOCIAL)? _____

ARE YOU A MEMBER OF THE PRESBYTERIAN CHURCH OF LAWRENCEVILLE? YES NO

DID ANY OF YOUR OTHER CHILDREN ATTEND OUR PRESCHOOL? YES NO

NAME OF PERSON(S) WHO WILL VOLUNTEER IN CLASSROOM _____

ARE THERE SPECIAL CIRCUMSTANCES THAT AFFECT YOUR PARTICIPATION IN THE COOPERATIVE ASPECT OF OUR SCHOOL? YES NO

COMMENTS: _____

(PLEASE TURN OVER)

HOW DID YOU HEAR ABOUT LPP? _____

OUR SCHOOL IS IN SESSION MONDAY – FRIDAY, 9 AM – 12 PM

PLEASE SELECT YOUR CLASS OPTION:

DUCKLINGS CLASS (2/3-YEAR-OLDS)

(AGE 2 BY OCT 1)

___ 2 DAYS \$2250 MONDAY & FRIDAY

CHICKADEES CLASS (3/4-YEAR-OLDS)

(AGE 3 BY OCT 1)

___ 3 DAYS \$3375 (PLEASE CIRCLE PREFERRED DAYS)

TUESDAY WEDNESDAY THURSDAY *FRIDAY

___ 4 DAYS \$4450 TUESDAY - *FRIDAY

*FRIDAY IS A MULTI-AGE CLASS DAY (3/4S AND 4/5S) IN OWLS CLASSROOM

OWLS CLASS (4/5-YEAR-OLDS)

(AGE 4 BY OCT 1)

___ 4 DAYS \$4450 TUE-WED-THUR PLUS ONE DAY
(CHOOSE ONE: MONDAY OR *FRIDAY)

___ 5 DAYS \$5400

*FRIDAY IS A MULTI-AGE CLASS DAY (3/4S AND 4/5S) IN OWLS CLASSROOM

WE OFFER A 12 NOON – 1 PM ‘LUNCH BUNCH’ OPTION FROM MID-SEPTEMBER TO MAY,
ON TUESDAY & WEDNESDAY. COST IS \$10 PER DAY. DETAILS AND SIGN-UPS IN SEPTEMBER.

PLEASE CONTACT ALISON YOUNG, DIRECTOR, TO DISCUSS ANY SPECIAL PERSONAL SITUATIONS.

609-844-0022

EMAIL: DIRECTOR@LAWRENCEVILLEPRESCHOOL.COM

SIGNATURE _____ DATE _____