

2020-21 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
9AM – 12 NOON

DUCKLINGS CLASS (2/3-YEAR-OLDS)

(AGE 2 BY OCT 1)
2 MORNINGS \$2300 MONDAY & FRIDAY

CHICKADEES CLASS (3/4-YEAR-OLDS)

(AGE 3 BY OCT 1)
___ 3 MORNINGS \$3450
TUESDAY WEDNESDAY THURSDAY

OWLS CLASS (4/5-YEAR-OLDS)

(AGE 4 BY OCT 1)
___ 4 MORNINGS \$4550 TUE-WED-THUR PLUS ONE DAY
(CHOOSE ONE: MONDAY OR *FRIDAY)
___ 5 MORNINGS \$5500

ALISON YOUNG, DIRECTOR, 609-844-0022
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SIGNATURE _____ DATE _____