

Date:

No.



2026-2027 Registration begins March 1st NEW STUDENTS

Child's Name _____ Birth Date _____

All students must be 3 years old by August 31, 2026

Age on Sept. 1, 2026 _____ years _____ months Male _____ Female _____

Anticipated Kindergarten Start Date (please circle): Fall of: 2027 2028 2029

First name you would like your child to learn and be called _____

Church affiliation _____ How did you hear about ALS? _____

Mom's Name _____ Occupation: _____

EMAIL: _____ Phone: _____

Dad's Name _____ Occupation: _____

EMAIL: _____ Phone: _____

Mailing Address: _____ City _____ Zip _____

Siblings Names/Ages/School: _____

Special Information (allergies, special needs, etc.) _____

Please indicate your first choice below:

To better balance the classrooms, we do not accept teacher or friend's together requests.

	Tuesday/Thursday	3 & 4 year old's	\$230/month
	Monday/Wednesday/Friday	3 - 5 year old's	\$310/month
	5-day Pre-Kindergarten	4 & 5 year old's	\$415/month

Please include to complete registration:

- ✓ Registration Fee: \$75.00 Cash or Check. Non Refundable.
- ✓ Emergency, Information, and Immunization Record Card (**attached**)
- ✓ Copy of birth certificate or other proof of birthdate
- ✓ Copy of immunization record

Initial:

FIRST TUITION DUE AUG 1:

Tuition is paid one month in advance - payments are due August through April and school is in session September through May. 10% Discount for tuition paid in full on Aug 1.

The first day of school is Tuesday, 9/8/2026.

OFFICE USE: Date _____ Email confirmed: _____ Cash _____ Check # _____
Memo _____ Confirmation _____ Pre K homework _____