



Registration Check List for NEW students:

- ☐ One check enclosed with the \$50 non-refundable registration fee
- ☐ One check enclosed with the first month's non-refundable tuition
 - ☐ Completed registration form
 - ☐ Copy of birth certificate
 - ☐ Copy of most recent shot records
 - ☐ T-shirt order form
 - ☐ Media Release/Discipline Policy

*Please complete a separate registration form for each additional child you are enrolling.

*LSA gives a 10% discount for each additional sibling enrolled.



Registration Packet 2017-2018

Student Information

Child's Name _____ Nickname _____

Date of Birth _____ Age _____ Gender: M F

Parent Information

Mother's Name _____ Father's Name _____

Address: _____ Address: _____

Cell Phone: _____ Cell Phone: _____

Work Phone: _____ Work Phone: _____

Email: _____ Email _____

Medical Information

Physician's Name _____ Phone #: _____

Preferred Hospital: _____

Emergency Transportation Authorization:

State Law requires that we have written authorization from a child's legal guardian to seek medical help in the event of a medical emergency. Signing the statement of this letter will provide us with that authorization.

Our policy, in the event of a medical emergency is to contact you first. If we can't contact you, we will try to contact any others you may designate. In the event that we are unable to contact you or designated representative(s), or if the medical emergency warrants immediate response, we will act, on your behalf and in the best interests of the child

Authorization Date: _____ Parent's Signature: X _____

Special Instructions (if any): _____

II. Refusal to Grant Permission: Parent's Signature: X: _____

What action should be taken? _____

HEALTH INFORMATION

Please list any preexisting illnesses, allergies, or health concerns:

Class Information

<i>Use a (1) and (2) for first and second choice.</i>	Program	Class Session	Age	Class Time	Monthly Tuition
	Preschool	T-TH	3-4	8:15-10:45 AM	\$95
	Preschool	T-TH	3-4	12:00-2:30 PM	\$95
	Preschool	M-W-F	3-4	8:15-10:45 AM	\$140
	Kindergarten Prep	M-W-F	4-5	12:00-2:30 PM	\$140
	Kindergarten Prep	M-T-W-TH-F	4-5	8:15-10:45 AM	\$225
	Kindergarten Prep	M-T-W-TH-F	4-5	12:00-2:30 PM	\$225
	*Kindergarten Prep Step-Up	3 days 4 days 5 days	4-5	8:15-10:45 AM (or) 12-2:30 PM	\$140 \$180 \$225

**The K-Prep Step-Up Program is limited to 5 students per session. Students will begin in August with a 3 day schedule, step-up to 4 days in October, and step-up to 5 days per week after Christmas Break.*

**Drop off for AM classes is between 8:00-8:15. Pick up for AM classes is 10:45-11:00.*

**Drop off for PM classes is between 11:45-12:00. Pick up for PM classes is 2:30-2:45.*

Personal Information

SECURITY ALERT

Please describe any living arrangements, custody issues or court orders we should be aware of or that you feel would be helpful to your child's teacher:

PICK-UP AUTHORIZATION

Please list the names of persons other than parents/guardians authorized to pick up your child:

Caregivers Name

Relationship to child

_____	_____
_____	_____
_____	_____
_____	_____

EMERGENCY CONTACTS

Persons to contact in the case of an emergency when parents cannot be reached:

Contact (1)

Name_____

Phone#_____

Relationship to child_____

Contact (2)

Name_____

Phone#_____

Relationship to child_____

SPECIAL INSTRUCTIONS

Please describe any special accommodations or special needs we should be aware of or that you feel would be helpful to your child's teacher:_____

T-SHIRT ORDER FORM

Included in the \$50 registration fee, your child will receive a Little Scholars T-shirt. Please indicate your child's size. If you'd like to purchase additional t-shirts, they will be \$10 each.

Youth XS (2-4) _____

Youth S (6-8) _____

Youth M (10-12) _____

Number of Additional Shirts to order _____

Please initial on the lines:

_____ I understand this registration form, the first month's non-refundable tuition, and a \$50 non-refundable registration/materials fee secures my child's placement for the 2016-2017 school year.

_____ I understand space is limited, and that placement is on a first-come, first-served basis due to the number of available spots.

_____ I understand that I am registering my child for a specific class and therefore cannot change their schedule once a placement has been made.

Parent Signature_____ Date_____