

- Returning
- New

# Little Scholars Academy of Lake Norman

14101 Stumptown Road | Huntersville, NC 28078  
704.274.9422 | Email: [info@LittleScholarsLKN.com](mailto:info@LittleScholarsLKN.com)

\_\_\_\_\_  
Application Date

\_\_\_\_\_  
Paid Registration

## 2019 – 2020 School Year Student Application

September 4, 2018 – May 22, 2019

**. A \$125 non-refundable Registration Fee should accompany each Application Form.** Checks will not be cashed until you are accepted.  
You can make checks out to: Little Scholars Academy. Please clearly print the information below.

Child's First Name: \_\_\_\_\_ Child's Last Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Please indicate the program you would like to enroll your child. Classes are determined by age and developmental level.

**Toddler (1 & 2 years):** \_\_\_\_\_ **Early Preschool (2 & 3 years):** \_\_\_\_\_ **Preschool (3 & 4 years):** \_\_\_\_\_ **Pre-Kindergarten (4 & 5 years):** \_\_\_\_\_

Please indicate the days you would prefer to have your child attend:

**Tuesday/Thursday** \_\_\_\_\_ **Monday/Wednesday/Friday** \_\_\_\_\_ **Monday – Friday** \_\_\_\_\_

### Tuition

**Tuition for the school year is paid in 9 monthly installments, September – May and is due on the first of each month.**  
**The monthly amount stays the same, even during months with breaks.**

**Sibling Discount = 15% off BOTH siblings**

Toddler & Early Preschool Programs	
Days per Week	Tuition per Month
Tue/Thu	\$235
Mon/Wed/Fri	\$325
Mon - Fri	\$450

Preschool & Pre-Kindergarten Programs	
Days per Week	Tuition per Month
Tue/Thu	\$215
Mon/Wed/Fri	\$305
Mon - Fri	\$430

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## Family Information

Child's First Name: \_\_\_\_\_ Child's Last Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Age at Time of Application (years/months): \_\_\_\_\_ Birthday: \_\_\_\_\_ Gender: (circle one) M F

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Parent's Name: \_\_\_\_\_ Phone: (Home/Cell/Work) \_\_\_\_\_ - \_\_\_\_\_ (Home/Cell/Work) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Hours: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_ Include email for LSA communication: (circle one) Yes No

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Parent's Name: \_\_\_\_\_ Phone: (Home/Cell/Work) \_\_\_\_\_ - \_\_\_\_\_ (Home/Cell/Work) \_\_\_\_\_ - \_\_\_\_\_

Same as above

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Hours: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_ Include email for LSA communication: (circle one) Yes No

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Caregiver's Name: \_\_\_\_\_ Phone: (Home/Cell/Work) \_\_\_\_\_ - \_\_\_\_\_ (Home/Cell/Work) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Hours: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_ Include email for LSA communication: (circle one) Yes No