

Registration Form
St. Paul's Lutheran Early Childhood Center
 Email: hb.stpauls@gmail.com
www.splecc.org

Child's Name _____ Date of Birth _____

Please mark the box next to the day and time of the program of your choice. Availability of classes is on a first come first serve basis.

Preschool Only Options

8:30-11:30 Tuition per Week	PS3 <i>Must be toilet trained and 3 years old by September 15</i>	PS4/PS5 <i>Must be toilet trained and 4 years old by September 15</i>
T/TH \$176/month	<input type="radio"/>	N/A
MWF \$252/month	<input type="radio"/>	<input type="radio"/>
M-F \$400/month	<input type="radio"/>	<input type="radio"/>

Tuition will be billed on the first business day of each month.

PS3 and PS4/PS5 Fees

\$150 Registration Fee (non-refundable) due at time of registration. A two week written notice is required for withdrawal.
 An activity fee of \$50 will be charged on the second Friday of October and the second Friday of February.
 St. Paul's Lutheran Church members will receive 50% off the registration fee.

 Parent Signature

 Date

- **SPLECC will be closed on the following holidays:** New Year's Eve Day, New Year's Day, Good Friday (Easter), Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the day after Thanksgiving, Christmas Eve Day, and Christmas Day.
- **SPLECC will be closed for one week during the Christmas Holiday please note the school calendar for exact days.**
- **SPLECC will close on snow/ice days** when Council Bluffs Community Schools closes. SPLECC will remain open when Council Bluffs Community Schools closes for cold days.

Please complete the information on the reverse side of this form.
Thank you.

Registration Form

St. Paul's Lutheran Early Childhood Center

1500 N. 16 Street Council Bluffs, IA 51501

Phone: 712.322.3294 Fax: 712.328.3338

Email: hb.stpauls@gmail.com www.splecc.org

Child's Full Name			
Child's Date of Birth			
Church Membership and or Baptismal Date			
Mother's Full Name			
Address			
Phone	Home	Cell	Work
Email			
Father's Full Name			
Address			
Phone	Home	Cell	Work
Email			
How did you learn of SPLECC?			

I have fully read the registration form and understand that my child's tuition will be billed the **first Friday of each month.**

Parent Signature

Date

Office Use:

Non-refundable registration and activity fee paid:

Date _____ Amount _____ Method of payment _____ Priority # _____