



2018-19 Preschool Registration

Submit all registration materials to:
 St. Andrew Lutheran Church
 ATTN: Kathi Wieman
 13600 Technology Drive
 Eden Prairie, MN 55347
 Ph: 952-697-7132 | Fax: 952-934-1783



Registration Information:

First Time Enrollment Returning Student Sibling of Current or Former Student

Child's Name _____ Birth Date _____ Gender _____

Home Address _____ City _____ Zip _____

Describe Special Needs (i.e. Allergies, Medical, Speech, IEP, Developmental) _____

Program Selection

Identify your first and second choices. You will be contacted if your first choice is not available. Checking a box below indicates a 9 month (Sept-May) class reservation that will be billed as a monthly tuition

Young 3 Year Olds – Students should be at least 33 months old by September 1				
2-Day Program: Tues/Thurs	9:00 AM–12:00 PM		\$195 per month	Activity Fee: \$90
3 Year Old Classes – Students should be at least 3 years old by September 1				
2-Day Program: Tues/Thurs	9:00 AM–12:00 PM		\$195 per month	Activity Fee: \$90
3-Day Program: Mon/Wed/Fri	9:00 AM–12:00PM		\$275 per month	Activity Fee: \$90
4 Year Old Classes				
3-Day Program: Mon/Wed/Fri	9:00 AM–12:00 PM		\$275 per month	Activity Fee: \$90
3-Day Program: Tues/Wed/Thurs	9:00 AM–1:00 PM	<i>Includes hot lunch</i>	\$371 per month	Activity Fee: \$110
4-Day Program: Mon–Thurs	9:00 AM–1:00 PM	<i>Includes hot lunch</i>	\$475 per month	Activity Fee: \$110

Registration Process:

To complete the preschool registration process, an \$80 **NON-REFUNDABLE** registration fee must be submitted with this registration form. The first month's tuition is due June 1st, 2018

ENROLLMENT CANCELLATION POLICY: 30-DAY NOTICE AND ONE-MONTH PAID TUITION ARE REQUIRED FROM DATE OF NOTICE

Parent Information

Parent/Guardian Names _____

Email Address _____ Home Phone Number _____

Mother's Cell Phone Number _____ Father's Cell Phone Number _____

Home Address _____

Signature _____



St. Andrew Early Learning, a ministry of St. Andrew Lutheran Church

FOR OFFICE USE ONLY	
Registration Fee Paid	_____
First Month's Tuition Paid	_____
Activity Fee	_____
Check Number	_____
Date	_____