

**2019/2020 School Year
REGISTRATION
FORM**



Registration Fee: _____
Check # _____
Dated: _____
Class: _____
Office use only

**411 Susquehanna Road, Ambler, PA 19002
215-646-7812
Scondeelis@udlc.org
Stacey Condeelis, Director**

Please complete a registration form for each child

**PLEASE
PRINT!**

Child's First Name _____ Last Name: _____

Preferred Name _____ Sex _____ Date of Birth _____

Primary Phone # _____ Email address _____

Address _____ City _____ Zip _____

Father's Name _____ Occupation _____

Father's Cell # _____ Work# _____

Mother's Name _____ Occupation _____

Mother's Cell # _____ Work # _____

Marital Status _____

Siblings	Name	Age	Others Living in Home:
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Has this child previously attended nursery school? _____ Where? _____

Family Church Affiliation _____

Known Allergy Information _____

Information that might help to better serve your child: _____

CLASS SELECTION

Please check the program you are interested in registering your child. Mark your preferences 1st, 2nd choice etc. Classes are 9:00 a.m. to 12:00 p.m., X-Bunch for Pre-K is 12:00 p.m. to 3 p.m. Mondays, Wednesdays and Fridays. Other afternoon classes are available throughout the school year, including daily lunch and learn until 3:00p.m. Information on those options is available on our website or at school.

Two Year Old Program (*Classes for twos are limited to 8 children*)

(\$327/month) _____ Monday, Wednesday and Friday
(\$232 /month) _____ Tuesday and Thursday
(\$232/month) _____ Monday and Wednesday

Three Year Old Program

(\$327month) _____ Monday, Wednesday and Friday
(\$232/month) _____ Tuesday and Thursday
(\$483/month) _____ Monday through Friday

Four Year Old and Pre-Kindergarten Programs

(\$327/month) _____ Monday, Wednesday and Friday
(387/month) _____ Monday thru Thursday
(\$483/month) _____ Monday through Friday
(\$220/month) _____ X-Bunch (Monday, Wednesday, and Fridays 12:00 pm to 3:00 pm)

Options: Please circle your preference:

Yes or No: I am interested in early drop-off from 8-9 a.m. and would like to learn more about this option.

Yes or No: I would like to be included in a family directory for the upcoming school year.

Yes or No: I give my permission for my child's photo and name, to be used in marketing.

School begins mid-September each year and is in session until mid-June. Children will be accepted only for the entire ten month term unless during the year there is a vacancy. A non-refundable registration fee of \$60 (\$100 per family) must be remitted with this application. Please make checks payable to *Upper Dublin Lutheran Church or UDLC*. Tuition is an annual amount divided over ten months September through June. Tuition is due the first of each month September through June. All classes are subject to minimum enrollment requirements.

I agree to the terms as stated on this application and wish to enroll my child.

Signature of Parent or Guardian: _____

Date: _____