

# IMMANUEL LUTHERAN SCHOOL Registration Information for New Preschool Families

Open Registration for New Preschool Families Begins Friday, January 29, 2021.

- Beginning at 8:15 am the morning of registration, you may get a number from the school door and get back in your car (so you can stay warm). 

  We will begin registration at 9:15 am.
- Registration Packets are accepted on a first come, first serve basis.
- Registration Packets **must** include: (1) Registration Form, (2) Registration Fee (check payable to ILS), (3) Birth Certificate (copy) and (4) Updated SC Immunization Form (no exemptions).
- Parents are asked to go to the front porch of the church and form a line in numerical order.
- Please have a 1<sup>st</sup> and 2<sup>nd</sup> choices marked on your Registration Form to ensure a place for your child.
- You may note any special circumstances, but teacher requests cannot be guaranteed.
- DUE TO COVID-19, WE WILL PROVIDE A VIRTUAL OPEN HOUSE THIS YEAR. PLEASE VISIT OUR FACEBOOK GROUP: "FRIENDS OF IMMANUEL LUTHERAN SCHOOL, SIMPSONVILLE, SC."

## Programs - K1 (Mom's Morning Out/MMO), K2, K3, K4

- All Classes at Immanuel Lutheran School have a Teacher and Assistant assigned to the class.
- All Children must be the appropriate age for the class they are enrolling by September 1.
- K1 (MMO) Children must be 12 months old by September 1 and Walking.
- K3 Children and Older must be Potty Trained.

### **Length of School Day**

- All K1 (MMO) classes offer a 3-hour day from 9:00 am to 12:00 pm (or 8:45-11:45, if needed due to Covid-19).
- K2, K3 and K4 classes are all 4-hour days from 9:00 am to 1:00 pm.
- All students in K2, K3 and K4 will bring a nut-free lunch each day.

#### **Registration Fee**

- The Registration Fee for NEW Students in MMO and Preschool is \$250.
- Please pay the Registration Fee with a check made payable to ILS.
- The Registration Fee includes all materials, supplies, activities and field trips for the student for the year.
- All Registration Fees are non-refundable.

#### **MMO** and Preschool Tuition

- All K1 (MMO) and Preschool Classes start the day after Labor Day, in September 2021.
- Preschool Tuition may be paid in full by check -or- in 9 monthly payments of ACH/ Checking Auto Draft on Sandbox, our parent portal. There is no discount for paying in full.
- The first payment for MMO/Preschool is drafted <u>July 16</u> with the next payment drafted <u>Sept 16</u> thru April 16.
- MMO and Preschool tuition payments skip the month of August. See Schedule Below:

MMO & PRESCHOOL PAYMENT SCHEDULE:
(1) July 16 (2) Sept 16 (3) Oct 16 (4) Nov 16
(5) Dec 16 (6) Jan 16 (7) Feb 16 (8) Mar 16 (9) Apr 16

• Please see the attached list of classes offered and monthly tuition rates.

#### 2021-22 Immanuel Lutheran School - MMO and Preschool Tuition Monthly Tuition (9 payments) September 2021 through Monthly Tuition (9 payments) With Lunch Hour May 2022 Without Lunch Hour Students Pack A Nut-Free Lunch 3 Hour Day 4 Hour Day Class Days/ Week (9:00-12:00)(9:00-1:00) **K1- Mom's Morning Out** Must be age 1 by Sept. 1 and Walking K1 (MMO) 1 day \$115 Lunch Hour Not Available K1 (MMO) 2 days \$200 Lunch Hour Not Available K1 (MMO) 3 days \$275 Lunch Hour Not Available K1 (MMO) 4 days \$340 Lunch Hour Not Available K1 (MMO) 5 days \$400 Lunch Hour Not Available K<sub>2</sub> Must be age 2 by Sept. 1 K2 2 days (Tu/Th) \$240 K2 3 days (M/W/F) \$330 K2 5 days (M-F) \$480 **K**3 Must be age 3 by Sept. 1 and Potty Trained **K**3 2 days (Tu/Th) \$215 **K**3 3 days (M/W/F) \$295 **K**3 5 days (M-F) \$430 K4 Must be age 4 by Sept. 1 K4 2 days (Tu/Th) \$215 K4 3 days (M/W/F) \$295 K4 5 days (M-F) \$430

#### **REGISTRATION FEES:**

- Registration, for all NEW MMO and Preschool Students is \$250, Returning MMO and Preschool is \$200.
- All registration, supply and activity fees are due at time of registration and are non-refundable.

# Immanuel Lutheran School - 2021-22 Registration

Date Registration Submitte		Sharing the Caring			
A Complete Registration F	acket Includes:	,	Christ		
Registration Form	Up-to-Date SC Certificate of Immunization (no exemptions)				
Birth Certificate	Registrat	Registration Fee, check made payable to ILS (non-refundable)			
iulion payments. ILS will em	all a link to the primary email ac	ed Sandbox. This is where parents a count where you may access you box within ONE WEEK of REGISTRAT	r account		
	not begin school without a co				
Office Use Only Check # Am	ount: Dat	e Received:	Class:		
Registration Fee includes all	activities, field trips, supplies ar	nd materials - Fee due at time of re e drafted. All others: Make Ched	egistration		
( ) \$250 for NEW MMO	or Preschool Student	( ) \$200 for Current MMO	or Preschool Student		
*********	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	******		
Child's Full Name					
Name child goes by	Date of Birth Sex: Male -or- Female? (circle)				
City	ZIP	Phone			
		none# Ce	ell#		
		one#C			
Email Address					
	* * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *	******		
K1 (1-5 Days) 9:00-12:00			0.00 1.00		
No Lunch Option for K1	() Mon () Wed () Fri () Tues () Thurs	( ) K3 Mon/Wed/Fri ( ) K3 Tues/Thurs	9:00-1:00 9:00-1:00		
( ) VO 11 ''''		( ) K3 Five Days, Mon-Fri	9:00-1:00		
( ) K2 Mon/Wed/Fri ( ) K2 Tues/Thurs ( ) K2 Five Days, Mon-Fri	9:00-1:00 9:00-1:00 9:00-1:00	( ) K4 Mon/Wed/Fri ( ) K4 Tues/Thurs ( ) K4 Five Days, Mon-Fri	9:00-1:00 9:00-1:00 9:00-1:00		

<sup>\*</sup>Please fill out the reverse side of this form.\*

Church Denomination:				
Church currently attends:		Is your child baj	Is your child baptized?	
Has your child previously attende	ed preschool? If so	, where?		
Do you have any special concer	ns about your child that yo	u would like to discus	ss with the teacher?	
How did you hear about our Sch	ool? ( ) Friends (who?)		( ) Front Sign	
( ) Advertisements (where				
In the event of an emergency, if			* * * * * * * * * * * * * * * * * * * *	
Name	Address	Phone	Relationship	
,			Name of the Control o	
2				
List all allergies (food or other) an	nd any special precautions	or treatment indicate	ed for these allergies.	
List any medications currently be	ing administered to the chi	d		
List any chronic health problems	and history of hospitalizatio	n		
Child's Physician or Clinic				
Address	Pho	ne		
MEDICAL EMERGENCY AUTHORIZA In the event reasonable attempts to at (Phone)has be deemed necessary by (Preferred Present available, by another licensed	contact me at (Phone) een unsuccessful, I hereby g hysician)	ive my consent for thor in the ev	e administration of any treatment vent the designated practitioner i	
Hospital), or any hospital reasonab opinions of two other licensed ph performance of such surgery.				
Date	Parent's Signatur	)		