



Angels of Hope Preschool

A Ministry of Hope Lutheran Church

700 S. Superior St.

De Pere, WI 54115

920-336-9843

www.hopedepere.org

Application for Enrollment 2008-2009

Registration fee must accompany this application and is non-refundable.
See reverse side for financial information.

Check your choice for the 2008/2009 school year:

Three-year-old Preschool – Tuesday and Thursday mornings

Four-year-old Preschool – Monday, Wednesday, and Friday mornings

CHILD INFORMATION

(Please include a copy of your child's birth certificate and immunization records.)

Name of child: _____ Date of birth: _____ M/F _____

Address: _____ Phone: _____

PARENT INFORMATION

Mother: _____

Father: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Work phone: _____

Work phone: _____

Address if different than child's: _____

Address if different than child's: _____

Marital status: (Mar/Sep/Div/Wid/Single)

Marital status: (Mar/Sep/Div/Wid/Single)

Member of Hope: Yes No

Member of Hope: Yes No

Angels of Hope Preschool admits students of any race, color, national and ethnic origin, or religion, or one with special needs to all rights, privileges, programs, and activities generally accorded or made available to students at the school.

2008-2009 TUITION AND FEES

REGISTRATION FEE

All students \$ 50.00

This non-refundable fee is to be paid at the time of registration. When accepted, this fee secures your child's enrollment.

TUITION

	HOPE MEMBER	NONMEMBER
2 day/week program-Monthly	\$ 75.00	\$ 80.00
3 day/week program-Monthly	105.00	110.00

Tuition may be paid monthly, bi-annually, or annually. Monthly tuition is due the night of orientation, and on the first day of school of each month thereafter. Your last payment will be the first day in May. The monthly payment is the same regardless of the number of days in each month. Semi-annual tuition is due the night of orientation and the first week of January. Annual tuition is due the night of orientation.

Payment should be made by check or money order. Checks should be made payable to "Angels of Hope Preschool". You can mail your checks to the preschool if you wish. If you bring your payment to school, you may turn it in with the office volunteer, or hand it to Kim Thompson. All tuition records are maintained by the preschool treasurer.

FAMILY DISCOUNT

If more than one child from a family is enrolled during a year, a discount of \$10.00 per month on total tuition will be granted. Registration fees for such families will be \$35.00 per child.

For Office Use

Date received: _____ Letter sent: _____ Birth cert: _____
Registration fee: _____ Check #: _____ Waiting list: _____