

Preschool Registration Form

2024-2025 School Year





(Child must have turned 4 on or before September 1 to be eligible for enrollment) *All classes are subject to change due to enrollment numbers.

Student's full name:		Person registering this child:		
Name you want used in school on name tags, cubby, ect.:		Birth date:	Age:	Gender:
Immunizations up-to-date? Early childhood screened? Yes No If yes, was re-screening recommend Yes No				
English spoken fluently?		Primary caregiver(s)? (circle all that apply)		
If no, which language?		Mother Father Grandparent Guardian/Foster		
Father's name:		Mother's Name		
Address:		Address:		
City/State/Zip:		City/State/Zip:		
Primary Phone/Cell #:		Primary Phone/Cell #:		
Place of Employment:		Place of Employment:		
Email:		Email:		
Please indicate your 1st,2nd, 3rd	d & 4th choice for class optio	ns: (additional cla	asses may be offered	pased on enrollment)
8:3	s/week AM 0-11AM per month		3 days/week AM 8:30-11AM \$157 per month	
5 days/week PM 12:35-3:05PM \$235 per month		3 days/week PM 12:35-3:05PM \$157 per month		
Tuitio	n payments are due on the first c	class day each mont	h, September-May	

\$35.00 per child NON-Refundable REGISTRATION FEE due at this time (make checks payable to ISD #813)

I would like to apply for an educational scholarship for my child. Scholarships are income-based. An "Application for Educational Benefits" along with supporting documents must be completed and submitted with this registration form. In addition I authorize Lake City Schools to share my information with Head Start if there is a possibility of income eligibilty. Scholarships will not be awarded until August 2024.