

**ADVENT LUTHERAN PRESCHOOL**  
**APPLICATION FOR ENROLLMENT**  
11800 W. 151<sup>ST</sup> Street, Olathe, KS 66062 (913) 681-5829

Date Received \_\_\_\_\_ Registration Fee \$55.00 \_\_\_\_\_ Paid: Check  Cash   
(non-refundable)

Name of Child \_\_\_\_\_ Name we should use, if different \_\_\_\_\_

Boy  Girl  Child's Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State, Zip \_\_\_\_\_

Home Phone number \_\_\_\_\_

Email address for parent \_\_\_\_\_

Mother's name \_\_\_\_\_ Father's name \_\_\_\_\_

Parent's Address if different than above \_\_\_\_\_

Mother's business phone \_\_\_\_\_ Mother's cell phone \_\_\_\_\_

Father's business phone \_\_\_\_\_ Father's cell phone \_\_\_\_\_

Other children in family and ages \_\_\_\_\_

Child lives with: both parents  Mother  Father  Guardian

Contact person in case of emergency \_\_\_\_\_ Phone \_\_\_\_\_

Secondary person to contact (other than parent) \_\_\_\_\_ Phone \_\_\_\_\_

Names of those authorized to pick child up from school \_\_\_\_\_

Does your child have any known allergies we need to be aware of? Please specify \_\_\_\_\_

Is your child on any regular medication or prescriptions? If so, specify \_\_\_\_\_

Please specify any pertinent information that would be helpful, disabilities, nose bleeds, toilet problems, fears, habits, speech issues \_\_\_\_\_

Has your child had any previous exposure to children's groups, Sunday School or preschool? Yes  No

If so, please specify \_\_\_\_\_

**Advent Lutheran Church/preschool may use, for promotional purposes, any photographs taken of the child named above.**

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

## ADVENT PRESCHOOL CLASSES

All **morning** class hours are 9:00 a.m. to 11:30 a.m.

All **afternoon** class hours are 12:30 p.m. to 3:00 p.m.

### Five year old program, \$190.00 per month

\_\_\_\_\_ M, T, W, F mornings

\_\_\_\_\_ M, T, W, F afternoons

### Extended care program, \$15.00 per day

\_\_\_\_\_ Monday afternoon (11:30 - 2:30)

\_\_\_\_\_ Tuesday morning (9:30 - 12:30)

\_\_\_\_\_ Tuesday afternoon(11:30 - 2:30)

\_\_\_\_\_ Wednesday morning(9:30 - 12:30)

\_\_\_\_\_ Wednesday afternoon (11:30 - 2:30)

*Note: There is a student minimum of 5 per class  
and a maximum of 12 per class for extended care.*

### Four year old program, \$160.00 per month

\_\_\_\_\_ M, W, F mornings

\_\_\_\_\_ M, W, F afternoons

### Extended care program, \$15.00 per day

\_\_\_\_\_ Monday afternoon(11:30 - 2:30)

\_\_\_\_\_ Wednesday morning(9:30 - 12:30)

\_\_\_\_\_ Wednesday afternoon (11:30 - 2:30)

*Note: There is a student minimum of 5 per class  
and a maximum of 12 per class for extended care.*

### Three year old program, \$125.00 per month

\_\_\_\_\_ T, Th mornings

\_\_\_\_\_ M, W mornings

### Extended care program, \$15.00 per day

\_\_\_\_\_ Tuesday afternoon(11:30 - 2:30)

\_\_\_\_\_ Wednesday afternoon (11:30-2:30)

*Note: There is a student minimum of 5 per class  
and a maximum of 12 per class for extended care.*

### Two 1/2 year old Kid's Day Out program, \$125.00 per month

\_\_\_\_\_ Tues/Thurs (9:00- 11:30)

For more information please call  
Jean Carlson, Advent preschool director

Preschool office (913) 681-5829

Church office (913) 681-2074

Jean's home (913) 294-9996