REGISTRATION FORM

CHILD'S Full NAME _____ DATE OF BIRTH_____

CLASS OPTIONS – All classes are four days a week Monday-Thursday.

45/15 Modified calendar
- ☐ K-Prep (4-year-old) Full Day: 8:00 – 1:30 **at Sumner**

Traditional calendar
- ☐ Discovery (3-year-old) 8:00 – 10:45 **at CLC**
- ☐ Discovery (3-year-old) 11:30 – 2:15 **at CLC**
- ☐ K-Prep (4-year-old) Full Day: 8:00 – 1:30 **at Sumner**
- ☐ K-Prep (4-year-old 8:00 – 10:45 **at CLC and Sumner**
- ☐ K-Prep (4-year-old) 11:30 – 2:15 **at CLC**

COST
- ☐ Discovery (3-year-old) classes are $150 per month for the 2018-19 school year. There is a onetime non-refundable registration fee of $30 to secure your spot.
- ☐ K-Prep (4-year-old) classes are free and are funded through Voluntary PreK if full funding continues from the state of MN. Students that are 5 before Sept. 1 will be placed on a waitlist.
    - o Student needs to be 4 as of September 1st, vaccinated and screened in order to qualify for VPK. Student must be a resident of Austin Public Schools.
    - o Full day students will need to establish a lunch account for their child through the district. Lunch cost is not included in VPK and is the responsibility of the family.

TRANSPORTATION/CHILD CARE
- ☐ My child will be driven to school by family
- ☐ My child would like to ride the SMART bus for an additional fee.
    - o I have completed an application to SMART.
- ☐ My child would like to attend Kids Korner for an additional fee.
    - o I understand that I am responsible to register for Kids Korner separately from preschool

HAS YOUR CHILD BEEN THROUGH EARLY CHILDHOOD SCREENING?
- ☐ Yes   ☐ No_____

HAS YOUR CHILD EVER RECEIVED OR QUALIFIED FOR SPECIAL EDUCATION SERVICES, INCLUDING SPEECH OR BIRTH – 3 HOME VISITING?
- ☐ Yes   ☐ No

DO YOU HAVE ANY SPECIAL CONSIDERATIONS WE SHOULD KNOW ABOUT YOUR CHILD?
- ☐ No   ☐ Yes, please list _____

Non-Refundable $30 PRESCHOOL DEPOSIT PAID (no **Discovery** spot will be held without deposit)

- o CHECK # _____   o CASH _____

- o CREDIT CARD # __ __ __ __ - __ __ __ __ - __ __ __ __ - __ __ __ __ EXP. __ __ - __ __

    Name as it appears on credit card _____

I have read and agree to the terms of enrollment:

Parent Signature_____ Date_____