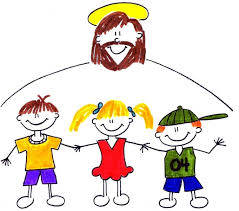
**PRACTICE PRESCHOOL**

****This class is for children who are turning four before 12/31/20 and who you plan to have attend a Y4’s or 4’s class in the fall of 2020.

Class Information:

When: Meets Thursdays from 9 – 11:30 am

Beginning January 16, 2020 for 15 weeks (No class 4/16)

Intro class January 9, 2020 9:45 – 11:00 w/adult

Class size: 8 children

Cost: $240 – may be paid in 5 monthly installments of $60 each (January – April)

Registration/Supply Fee: $35 (due with registration)

• This class is intended as a first preschool experience and is designed to help children transition into the four’s classes in the fall.

• Children will be required to have a complete student file, including a current medical form, on file prior to the first class.

• Parents will NOT stay, except on a rotating basis as we do in our current programs. Parents will be asked to provide snack and juice on their scheduled day.

If you have any questions or would like to visit, please talk with Laurie Schneider, ECC Director. She can be reached by email at [ascnecc@gmail.com](mailto:ascnecc@gmail.com) or by phone at 440-777-6365 X103.

Ascension Lutheran Early Childhood Center (ECC) 28081 Lorain Road North Olmsted, OH 44070 440-777-6365 X103 EMAIL: [ascnecc@gmail.com](mailto:ascnecc@gmail.com) WEBSITE: [www.alcecc.com](http://www.alcecc.com)

PRACTICE PRESCHOOL Registration Form

Please include a $35 non-refundable registration/supply fee with this form.

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □ Male □ Female

Parent’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Office use Only: $\_\_\_\_\_\_\_\_\_\_\_\_ #\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_