

**2022-2023**  
**REGISTRATION FORM FOR**  
**LITTLE CHERUBS CHRISTIAN PRESCHOOL**

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

Date enrolled \_\_\_\_\_

Session assignmt: \_\_\_\_\_

**Please complete BOTH sides of form**

Please circle class you wish your child enrolled in    3's 9:00-1:00    4's 9:00-1:00    4's 9:00-2:00

Child's Full Name \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_    \_\_\_\_\_    M    F  
Birth Date    Nickname    Sex (circle one)    (Area Code) Phone

Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address (if different from child's) \_\_\_\_\_ e-mail address \_\_\_\_\_

Mother's Place of Employment/Address \_\_\_\_\_ Position \_\_\_\_\_ (Area Code) Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Address (if different from child's) \_\_\_\_\_ (Area Code) Phone \_\_\_\_\_

Father's Place of Employment/Address \_\_\_\_\_ Position \_\_\_\_\_ (Area Code) Phone \_\_\_\_\_

Sibling Name/Birth Date \_\_\_\_\_ Sibling Name/Birth Date \_\_\_\_\_ Sibling Name/Birth Date \_\_\_\_\_

Child's Previous School/Daycare Experience \_\_\_\_\_

How did you hear about us? \_\_\_\_\_ What is the primary language spoken at home? \_\_\_\_\_

Church Affiliation \_\_\_\_\_

**EMERGENCY INFORMATION**

Name of Child's Physician \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Child's Dentist \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Allergies / Restrictions / Regular Medications \_\_\_\_\_

Physical / Emotional Needs (Please attach additional pages if more room is needed to explain) \_\_\_\_\_

**REGISTRATION FORM  
EMERGENCY INFORMATION, CONTINUED**

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Child's Name \_\_\_\_\_

List below, in order of priority, people to call when neither parent can be reached:

_____ Name/Address	_____ Phone	_____ Relationship to Child
_____ Name/Address	_____ Phone	_____ Relationship to Child
_____ Name/Address	_____ Phone	_____ Relationship to Child
_____ Name/Address	_____ Phone	_____ Relationship to Child

1. The above mentioned people have my permission to pick up my child any time I am unable to do so.
2. I hereby give permission for my child to receive emergency medical or dental treatment, if necessary. I also give permission for staff members of Little Cherubs Christian Preschool to transport my child by state inspected and registered automobile or arrange for transportation by ambulance. Permission is also given for Red Cross trained staff members to administer First Aid.
3. I will furnish certificates satisfactory to the school from a physician certifying as to the health of the child to be enrolled before my child will be admitted to school.
4. My child meets the age requirements and is toilet trained.
5. I understand that if my child is displaying illness he shall be excluded from school at the discretion of the Head Teacher or other staff member in the teacher's absence. I understand that I will be required to pick up my child or have an authorized person pick him up.
6. I agree to pay the annual tuition fee and registration fee. I also agree to the tuition terms as outlined on the "Tuition Fees" sheet.

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Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**TUITION FEES FOR THE 2022-2023 SCHOOL YEAR  
FOR  
LITTLE CHERUBS CHRISTIAN PRESCHOOL**

THREE YEAR OLDS: 2 DAYS (Tue, Thur 9:00 a.m. - 1:00 p.m.)..... \$2,812  
(An optional 1-hour Extended Day program from 1:00-2:00 is offered  
at \$11/hr)

FOUR YEAR OLDS: 3 DAYS (Mon, Wed, Fri 9:00.a.m. - 1:00 p.m.) ..... \$4,028  
(For children not enrolled in the 9:00-2:00 Extended Day program,  
and wish to occasionally have their child stay the extra hour, there is  
a charge of \$11/hr)

FOUR YEAR OLDS: 3 DAYS (Mon, Wed, Fri 9:00 a.m. - 2:00 p.m.)..... \$5,035

REGISTRATION FEE: \$ 100.00 (this fee is non-refundable)

**TUITION TERMS:**

1. There is an annual tuition fee that can be paid at the time of registration or divided into ten monthly installments. Tuition installments are due on the first of the month, beginning **August 1** and continuing until **May 1**.
2. No credit is given for time absent due to illness, snow or any other reason. In a case of extended absence due to severe illness or extended hospitalization, please see the Director. Each situation will be given individual consideration and handled according to the discretion of the Director.
3. The **registration fee is to accompany the Registration form** when applying for admission to Little Cherubs Christian Preschool.
4. There will be an automatic late charge in the amount of \$25.00 per month if a payment is seven or more days late. This charge is per payment until the bill is up to date. Two or more late payments will result in your being asked to withdraw from the program.
5. If more than one child is enrolled in the program, the tuition rate is reduced.
6. Children are enrolled for the entire year or the balance of the year. Children enrolled after the beginning of the school year will pay a pro-rated tuition fee.
7. Six weeks written notice is required before withdrawal. There is no withdrawal after March 1.
8. Little Cherubs Christian Preschool reserves the right to terminate this agreement upon thirty day written notice to the parents or the person with whom the child resides.

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Parent's Signature

Date

**EMERGENCY DENTAL PERMISSION FORM**

I hereby give permission for my child to receive emergency dental treatment, if necessary. I also give permission for staff members of Little Cherubs Christian Preschool to transport my child by state inspected and registered automobile or arrange for transportation by ambulance. Permission is also given for Red Cross trained staff members to administer First Aid.

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Parent's signature

Date

**EMERGENCY MEDICAL PERMISSION FORM**

I hereby give permission for my child to receive emergency medical treatment, if necessary. I also give permission for staff members of Little Cherubs Christian Preschool to transport my child by state inspected and registered automobile or arrange for transportation by ambulance. Permission is also given for Red Cross trained staff members to administer First Aid.

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Parent's signature

Date

## DISCIPLINE POLICY

The goal of discipline is to help the child develop self-control and move toward appropriate social behavior. Examples of developmentally appropriate methods utilized for resolving conflicts are:

**Positive Guidance** – When disputes arise among children and staff, the staff will encourage a “talking out” process where the goal is to review with the child why the behavior was unacceptable and help the child to acknowledge feelings and find solutions using the child’s ideas where ever possible. The child will be taken to a quiet area.

**Setting Clear Limits** – Staff will encourage and model positive behavior, positive reinforcement, the use of peer support and clearly defined rules.

Teachers will help children feel good about themselves and behave in responsible ways.

**Redirection** – The teacher and the child will discuss and decide when the child is ready to rejoin the group in a positive manner.

A child who may be aggressive or who is disruptive or destructive of other children’s work may be asked to make an activity choice in another area.

Staff will continuously supervise children during disciplinary actions.

Parents will be notified if the child requires a behavior management plan. The director, teachers and parents will work together to design a plan to ensure success for the child.

Staff shall not be abusive, neglectful or use corporal, humiliating or frightening punishment under any circumstances. No child will be physically restrained unless it is necessary to protect the safety or health of the child or others, using least restrictive methods, as appropriate.

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Parent’s signature

Date

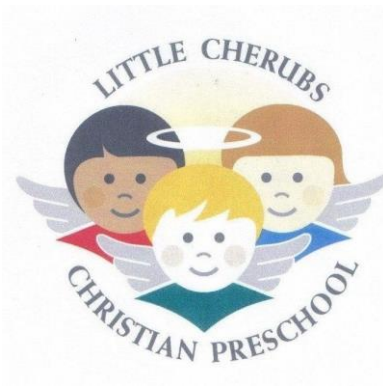
**PESTICIDE ACKNOWLEDGMENT**

I acknowledge the fact that CLC may periodically need to treat the church building and grounds with pesticides to extinguish any pest issues that may arise. I understand that all attempts will be made to have any required treatment done while school is not in session.

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Parent's signature

Date



## Permission To Use Pictures

I give Little Cherubs Christian Preschool, of Cheshire Lutheran Church permission to use my child's picture:

\_\_\_ displayed in school/church

\_\_\_ in local newspapers, (no last names will be used)

\_\_\_ on our website (no names used)

Parent signature: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date: \_\_\_\_\_