

Thank you for your interest in The School of Grace Preschool. We are a half-day, Christian, parent-participatory preschool serving children ages 6 months through 5 years. The preschool operates from September through May.

Registration Procedures:

- Fill out and sign a registration form for each child.
- Include a check payable to "The School of Grace" equal to the registration fee for each child.
- Mail the registration form and registration fee to:
The School of Grace
5010 Six Forks Rd
Raleigh, NC 27609
- Registration forms and fees for families currently enrolled and Grace Lutheran Church members must be submitted by **February 9, 2018** to receive priority status.
- Families will be notified regarding the status of your application.

Additional Notes:

- Registration fees are not applicable to tuition and are non-refundable unless the parents move to another town, notifying The School of Grace in writing prior to July 1, 2018.
- September tuition is due at the Parent Orientation in August 2018.
- Families whose tuition is more than \$500 per month will receive a 5% discount on tuition (not including registration fees).
- Children do NOT need to be fully potty-trained by the beginning of the school year.
- The School of Grace allocates one place in each class for a child from a refugee family, referred by Lutheran Services Carolinas.
- The School of Grace allocates one place in each class for a child with special needs. In order to qualify as such, an active IFSP (for children 6 months - 2 years) or an IEP (ages 3 - 5 years) must be in place. We support and encourage parents to seek out the services provided by Wake County through Health and Human Resources or Project Enlightenment.
- Tours are recommended prior to registration.

You can always receive updated information about our preschool on our website:

www.schoolofgrace.com

We look forward to having your family be a part of our preschool family!
Please let me know if you have any questions.

Sincerely,

Lynn Hess
Director

info@schoolofgrace.com
(919) 787-4740

Registration Form 2018/2019

Please indicate 1st, 2nd, and 3rd class choice. All classes meet from 9am-1pm.

Classes and Days/Week	Age Requirements	Tuition per month	Registration Fee																				
<p>Turtles Please rank your day preferences 1-5 (with 1 being your first choice)</p> <p>1 Day 2 Days</p> <table border="1"> <tr> <td><input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Mon</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Mon</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Tues</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Tues</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Wed</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Wed</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Thurs</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Thurs</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Fri</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Fri</td> </tr> </table> <p><small>*Contact the Director to request more than two days per week</small></p>	<input type="checkbox"/> N/A	<input type="checkbox"/> Mon	<input type="checkbox"/>	<input type="checkbox"/> Mon	<input type="checkbox"/>	<input type="checkbox"/> Tues	<input type="checkbox"/>	<input type="checkbox"/> Tues	<input type="checkbox"/>	<input type="checkbox"/> Wed	<input type="checkbox"/>	<input type="checkbox"/> Wed	<input type="checkbox"/>	<input type="checkbox"/> Thurs	<input type="checkbox"/>	<input type="checkbox"/> Thurs	<input type="checkbox"/>	<input type="checkbox"/> Fri	<input type="checkbox"/>	<input type="checkbox"/> Fri	6 months through 2 years Born between 6/1/16 and 3/1/18	1 day \$135 2 days \$260	1 day \$135 2 days \$135
<input type="checkbox"/> N/A	<input type="checkbox"/> Mon	<input type="checkbox"/>	<input type="checkbox"/> Mon																				
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<input type="checkbox"/>	3 days – Tu/W/Th																						
<p>Frogs</p> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>3 days – M/W/F</td> </tr> <tr> <td><input type="checkbox"/></td> <td>5 days – M-F</td> </tr> </table>	<input type="checkbox"/>	3 days – M/W/F	<input type="checkbox"/>	5 days – M-F	3-4 year olds Born on or before 8/31/15	\$260 \$350	\$260 \$350																
<input type="checkbox"/>	3 days – M/W/F																						
<input type="checkbox"/>	5 days – M-F																						
<p>Monkeys</p> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>5 days – M-F</td> </tr> </table>	<input type="checkbox"/>	5 days – M-F	4-5 year olds Born on or before 8/31/14	\$350	\$350																		
<input type="checkbox"/>	5 days – M-F																						

Child's Last Name		Child's First Name		<input type="checkbox"/> Male	Nickname (if any)	
				<input type="checkbox"/> Female		
Date of Birth		Home Address			City & Zip	
Family Information	Parent 1 Name		Cell Phone		Other Phone	
	Address		City/State/Zip		Email Address	
	Employer				Member of GLC? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Parent 2 Name		Cell Phone		Other Phone	
	Address		City/State/Zip		Email Address	
	Employer				Member of GLC? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Please list your expectations for your child this year at The School of Grace:					

Information About Your Child	Please list childcare programs previously attended:	Languages spoken in the home by child and parents:
	Please list any medical conditions, serious accidents, delays, or speech problems that the teacher or school should be aware of for your child:	
	Please summarize any professional evaluation or treatment that your child has received:	
	Please list any allergies your child has:	Please list any fears your child has:

The School of Grace Parent Participation Agreement

I understand that:

- The School of Grace welcomes enrollment of students of all religions, races and national or ethnic origins.
- The Director reserves the right to maintain a reasonable boy/girl ratio.
- In order to maintain the appropriate adult/child ratio, siblings may not accompany adults during parent participation activities, unless first discussed with the teacher.
- Minimum class sizes must be met in order for a class to be offered.
- The School of Grace is **NOT** an allergy-free school. Parents of children whom may require medical attention of any kind (including medication or procedure) should contact the director in advance for complete policies.
- The complete parent handbook stating all preschool policies is located on our website.
- The School of Grace does **NOT** accept NC immunization exemptions or waivers.
- As a member of a Parent Participatory Preschool, I agree to work as a Helping Parent in the classroom approximately two times per month, attend parent workdays, and serve on at least one committee.

Committee Responsibilities (please rank your choices 1-6, with 1 being your first choice):

___ **Refreshments** – provide refreshments for parent workshops, teacher appreciation/workdays, parent/teacher conferences and occasional theme snacks for classes, etc.

___ **Refugee/Special Needs** – help integrate refugee families and families with special needs children into the preschool family.

___ **Maintenance** – assist with any needed maintenance in addition to designated parent workdays.

___ **Fundraising** – assist one area of Fundraising: Grants, Scholarships, Fundraising Support.

___ **Publicity** – host events and prepare materials to attract new students, implement strategies to make the preschool more visible in the community.

___ **Room Parent** – assist teacher (as needed) to communicate classroom needs to parents, set-up and maintain online Helping Parent calendar (note: this is not the same as being a Helping Parent).

Parent Signature:

The School of Grace

Date:

www.schoolofgrace.com