

KindergartenLA PreSchool

Registration Application

Parent(s) Name(s): _____

Child's Full Name: _____ Birth Date: ___ / ___ / _____

Address: _____ Home Phone: _____

Best time to call: _____ Cell: _____

City: _____ State: _____ Zip Code: _____

Circle Days You Are Interested In*

M T W TH F

* 2 day minimum required

* 4 days **only** if available

Please Check The Program You Are Applying For:

German Immersion.

A personal interview with the applicant for language skills assessment may be required to ensure proper mix of children in the immersion program.

Part Time 08:30am – 12:30pm

Full Time 08:30am – 4:00pm

I would be interested in extending my hours from 4:00pm to 5:30pm*

* In order to provide this service, we need to have a minimum of 6 enrolled children

Spanish Learning

German Learning

Afternoon Group

P T 08:00am – 12:00pm

P T 08:00am – 12:00pm

01:00pm – 4:00pm

F T 08:00am – 4:00pm

F T 08:00am – 4:00pm

I would be interested in extending my hours from 4:00pm to 5:30pm*

* In order to provide this service, we need to have a minimum of 6 enrolled children.

REGISTRATION APPLICATION SIGNATURE

I understand that filling out this application does not guarantee admission.

This form must be accompanied by a check payable to "KindergartenLA, LLC" for the \$125.00 application fee (non-refundable). *Currently enrolled families: application fee will be waived.*

Print Parent Name or Guardian: _____

Signature: _____ **Date:** _____