

**4 Year Old Registration Form
For 2023/2024 School Year**



Dear Parents and Guardians:

Linway Preschool wants to be your child's first positive experience on his/her educational journey!

To register your child, please complete the form and return with the NON-REFUNDABLE \$40 Registration Fee.

Do not return the form until you are sure your child will attend our school. No exceptions will be made to our Non-Refundable Registration Fee Policy.

Please take note that our class sizes are limited.

We encourage you to make decisions regarding your child's preschool attendance and return this form as soon as possible. Your cancelled check will serve as a receipt and your child's acceptance to our school. If you prefer a written receipt, please let us know.

In late July, you will receive forms, school calendar, and a monthly payment schedule for the upcoming school year. **Forms and the first tuition payment are due on or before the parent/guardian orientation night**, which will be held roughly one week prior to the start of classes.

If you have any questions, please call the church office at 412-824-3555, and your phone call will be returned as soon as possible.

Thank you and we look forward to having your child join us for this upcoming school year!

Sincerely,
Linway Preschool Board

**600 LINCOLN HIGHWAY
NORTH VERSAILLES, PA 15137
412-824-3555**

**4 Year Old Registration Form
For 2023/2024 School Year**



Child must be 4 by Sept. 1st

Child's Name: _____ Boy Girl

Birth Date: ____ / ____ / ____

Address: _____

Primary Phone Number: _____

Secondary Phone Number: _____

E-Mail Address: _____

Mother's Name: _____

Occupation: _____ Work Phone: _____

Father's Name: _____

Occupation: _____ Work Phone: _____

Does your child have a disability we need to be aware of? Yes No

If yes, please indicate disability: _____

Registration Fee: \$40.00 Tuition Fee: \$1,170.00 or 9 monthly installments of \$130.00 each. Tuition is due in advance and must be paid by the last school day of the previous month. Registration Fee is NON-REFUNDABLE – No Exceptions.

School Hours: AM Class – Monday, Wednesday, and Friday – 9:00 a.m. – 11:30 a.m.

PM Class – Monday, Wednesday, and Friday – 12:30 p.m. – 3:00 p.m.

Class Preference: AM **PM**

PLEASE NOTE: We will make an effort to accommodate your preference, however, please know that it is first come, first served, and will depend on the number of students registered. **Preferences are not guaranteed.**

Signature of Parent/Guardian: _____

Printed Name: _____

Preschool Use Only		
Student # _____	AM <input type="checkbox"/>	PM <input type="checkbox"/>
Amount Paid: _____	Check # _____	Date: _____

PLEASE DETACH FORM AND RETURN WITH REGISTRATION FEE