

**FIRST GOOD SHEPHERD LUTHERAN  
PRESCHOOL**

323 South 13th Street  
Las Vegas Nevada 89101  
Phone: (702) 382-8610 Fax: (702) 384-2080

**FIRST GOOD SHEPHERD LUTHERAN  
PRESCHOOL PROGRAM  
REGISTRATION/TUITION RATES  
FALL SESSION BEGINS AUGUST 22, 2011**



**REGISTRATON & MATERIALS FEE  
Per child, due at time of registration  
(All fees are non-refundable)**

**\$250**



**TUITION RATES  
FULL DAY PROGRAM**

7:00 A.M. - 6:00 P.M.

Includes 2 snacks & lunch

**PER MONTH - 9-MONTH TUITION PLAN**

*The first payment for the 9-month plan is due on or before Parent Orientation on Monday, August 15th. 2nd payment is due on October 1st.*

	<b>1 CHILD</b>	<b>2ND CHILD (OR MORE)*</b>
3-day	\$467	\$444
4-day	\$678	\$645
5-day	\$750	\$713

**PER MONTH - 10-MONTH TUITION PLAN**

*The first payment for the 10-month plan is due on or before the 1st of each month beginning August 1st.*

	<b>1 CHILD</b>	<b>2ND CHILD (OR MORE)*</b>
3-day	\$420	\$400
5-day	\$677	\$643

The 3-day programs will be on:  
Monday, Tuesday, Wednesday

**OR**

Wednesday, Thursday, Friday

(Your choice of which best suits your needs)

The 4-day programs will be:

Monday, Tuesday, Thursday, Friday

\*Sibling discount applied to 2nd child in preschool with the lesser tuition. **OR** if second child is in elementary, sibling discount applied to elementary-aged child if preschooler attends 5-day program. No discount will be applied to elementary-aged child when preschooler only attends 3-day or 4-day program.

We believe:

Every child is a unique creation of our heavenly Father with an individual pattern and timing of growth, as well as individual personality, learning style and family background.

Every child is in need of developing a personal relationship with Jesus Christ, knowing Him as Lord and Savior.

Children acquire knowledge about their physical and social settings through playful, hands-on interaction with their environment.

Teachers of young children are guides or facilitators responsible for preparing an environment that will provide stimulation, challenging materials and activities for their students to explore.

Therefore...

First Good Shepherd Lutheran Preschool shall endeavor to provide a safe, loving, nurturing, and spiritually motivating environment, encouraging whole child growth and development while responding to the needs of families. Each child will be exposed to a wide variety of learning experiences, encouraged to explore his/her environment, and participate in activities in which he/she will experience success. Although specific learning experiences will be planned for each day, the atmosphere will not be so highly structured as to prevent the use of incidental (happen-chance) learning situations to their fullest extent.

An integral part of our ministry is to respond to your family needs and provide you with spiritual and emotional support. We will strive to create opportunities for families to come together in fellowship, and to encourage you in your role as a Christian parent.



1. Enrollment will be open to children who turn 1½ prior to September 30, 2011. Children must be trained in bathroom habits; training pants or diapers are not acceptable.
2. Class size will be limited to 15/16 children per class. A lead teacher and an assistant are assigned to each classroom.
3. Children will be placed in classrooms according to their age and attendance needs. Final room and teacher placement is at the discretion of the Preschool Director.
4. The preschool operates from 7:00 a.m. to 6:00 p.m. Actual class time runs from 8:30 a.m. to 3:15 p.m.

We do not provide a breakfast program; however, you may elect to send a “sack” breakfast with your child from home if he/she arrives before 8:00 A.M. We will provide milk for cereal or to drink at no additional cost. (Please only send items with sound nutritional value, i.e. bagel, fruit, yogurt, cereal).  
Morning snack served at 9:15 – Lunch at 11:30 – Afternoon snack at 3:00

5. The tuition is charged at an annual rate and divided into 9 or 10 equal monthly payments. For the 9-month plan the first payment is due on or before Parent Orientation on Monday, August 15, 2011. Each subsequent payment is due on or before the first of the month, beginning October 1<sup>st</sup>. For the 10-month plan payment is due on or before the first of the month beginning August 1<sup>st</sup>. A 5% late fee will automatically be added to any account remaining unpaid after the 10<sup>th</sup> of the month unless an arrangement has been made with the preschool office. A 10% discount will be allowed for one 1-week vacation allowance throughout the 9- month school year. (i.e. If your monthly tuition is \$600, then your 1-week vacation allowance is \$60.) No other adjustments will be made for sick or no-show days.

Thank you for considering First Good Shepherd Lutheran Preschool Program for your child’s early childhood learning experiences. We look forward with enthusiasm to serving your child and family at First Good Shepherd. Please feel free to call the office at 382-8610 if you have further questions.

Mrs. Pam Ufer – Preschool Director (“Miss” Pam to all children and parents)

Mr. James E. Krafft – School Administrator

**FIRST GOOD SHEPHERD LUTHERAN PRESCHOOL PROGRAM**

**REGISTRATION APPLICATION FORM 2011-2012**

Please complete and return with your Registration & Materials fee of \$250.

\*\*\*All fees are required at time of registration and are non-refundable\*\*\*

CHILD'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY/ZIP: \_\_\_\_\_

CHURCH AFFILIATION: \_\_\_\_\_ DENOMINATION: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/ZIP: \_\_\_\_\_

TELEPHONE: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work) \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/ZIP: \_\_\_\_\_

TELEPHONE: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work) \_\_\_\_\_

PARENTS NAME WITH WHOM THE CHILD LIVES: \_\_\_\_\_

Emergency contact if parent cannot be reached: \_\_\_\_\_

Child's medical condition or allergies: \_\_\_\_\_

Other children currently enrolled in FGSLs:

Name: \_\_\_\_\_ Current grade/class \_\_\_\_\_

Name: \_\_\_\_\_ Current grade/class \_\_\_\_\_

I WISH TO REGISTER MY CHILD FOR THE FOLLOWING SESSIONS:

3-year-old Preschool or 4-year-old Pre-Kindergarten

FULL DAY PROGRAM

Check one

3 Day (M/TU/W)

3 Day (W/TH/F)

4 Day (M – F) M/Tu/Th/F

5 Day (M – F)

A copy of the doctor's record of immunization shots is required before the child is allowed to begin preschool.

Signature \_\_\_\_\_

Date \_\_\_\_\_