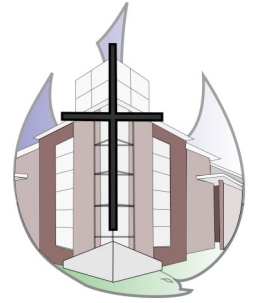


Our Savior Preschool
 5101 Dell Range Blvd.
 Cheyenne, WY 82009
 (307) 632-2580
2017 - 2018
ENROLLMENT FORM



An \$80.00 enrollment fee is required for each child when enrolled. This fee is non-refundable.

A returned check will invalidate your child's enrollment in our program.

I wish my child to be enrolled in: (please check appropriate box, and please indicate 3 or 5 days if PM Pre-K class)

3 Day OR 5 Day Pre-Kindergarten
PM Class - 4's & 5's

Monday - Friday
 12:15 - 3:15PM
(Your child must be four on or before September 15)

3 Day Tuition (Our Savior member)*	\$150 monthly
3 Day Tuition (non member)	\$180 monthly
5 Day Tuition (Our Savior member)*	\$220 monthly
5 Day Tuition (non member)	\$270 monthly

*Members of a LCMS Sister Congregation are also eligible for Our Savior Member rates

3 Day Pre-Kindergarten
AM Class - 4's & 5's

Monday - Wednesday - Friday
 8:15 - 11:15AM
(Your child must be four on or before September 15)

Tuition (Our Savior member)*	\$150 monthly
Tuition (non member)	\$180 monthly

*Members of a LCMS Sister Congregation are also eligible for Our Savior Member rates

2 Day Preschool
AM Class - 3's & Young 4's

Tuesday & Thursday
 8:15AM - 11:15AM
(Your child must be three on or before September 15)

Tuition (Our Savior member)*	\$125 monthly
Tuition (non member)	\$145 monthly

*Members of a LCMS Sister Congregation are also eligible for Our Savior Member rates

CHILD'S INFORMATION

 Child's Full Name

 Name Child Goes By

M _____ F _____

 Birth date

 Address

 City

 State

 Zip

For Office Use Only

Registration Fee Paid Yes

Check # _____ Cash

Date _____

Are you or your spouse in the military? Please inquire about our 10% military discount for your child's tuition.

PARENT INFORMATION

Parents are _____ Married _____ Divorced _____ Separated

Child lives primarily with _____ Mother _____ Father _____ Both

Mother's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work/Cell Phone _____

Email _____

Attends Church _____ Yes _____ No _____ If Yes, Where _____

Father's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work/Cell Phone _____

Email _____

Attends Church _____ Yes _____ No _____ If Yes, Where _____

Primary Contact Person _____

Best phone number to reach you at _____

Best time to reach you _____

"See what love the Father has given us,



that we should be called children of God."

1 John 3:1