

Ascension Lutheran Preschool & Extended Care

1479 Morse Road - Columbus, Ohio 43229 - OFFICE: 614-268-2010 - FAX: 614-268-1164

ascensionpreschool@hotmail.com



Dear Family,

Thank you for registering with Ascension Lutheran Preschool. This sheet is the initial registration form, which will serve as the first step in enrolling your child for the upcoming 2015-2016 school year. **To reserve your child's space, please fill out the form below, and return it to the preschool office, along with the \$45.00 registration fee as soon as possible.** A complete enrollment packet will be given to you once the registration form/fee has been received. The registration process will be completed once the enrollment packet is received by our office. The Classroom/Teacher Assignments will be mailed to your home in August. *If you are planning on "moving" over the summer months, please remember to contact our office so that we will have a current address for your child.* If you have any questions, please contact me at 268-2010.

Sincerely,

Mary Lynne Magnacca, Administrator
Ascension Lutheran Preschool

Please detach and return with your payment. Thank you.

REGISTRATION FORM

**Ascension Lutheran Preschool
School Year 2015-2016**

Name of child: _____ Date of birth: _____

Address: _____ City: _____ Zip Code: _____

Telephone #: _____ Email: _____

Name of parent(s) or guardian with whom child lives: _____

Age on September 30, 2015*: _____ Sex: _____

Number of days per week of enrollment (PLEASE CIRCLE): 2 3 4 5

Are you interested in Extended Child Care?: ☐ YES ☐ NO

If selecting YES, please list Days & Times: _____

Registration fee: **\$45.00** Paid on (Office use only): _____ Cash / Check / Credit Card

Ascension Lutheran Preschool Does Accept PFCC (Title 20)

*Determines placement into class level.