

# 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 2014-2015 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 registration packet will be mailed to your home at the end of June. 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 2014-2015**

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, 2014\*: \_\_\_\_\_ 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.