

**2023-2024 Enrollment Agreement**  
**CHRIST LUTHERAN EARLY EDUCATION CENTER**  
11720 Nieman Road, Overland Park, KS 66210 913-754-5840

Child's Name \_\_\_\_\_  Boy  Girl

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Primary email address for correspondence** \_\_\_\_\_

Mother's Name \_\_\_\_\_ Employer \_\_\_\_\_

Cell or Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Father's Name \_\_\_\_\_ Employer \_\_\_\_\_

Cell or Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

*The session(s) have been marked accordingly to the preferences indicated on the Enrollment Request form.*

**Full Day Multi-age Class (3's & 4's) 8:30am – 3:30pm**

*My child is reliably potty trained and able to use the bathroom independently.*

*My child is reliably potty trained.*  Yes  No

Monday  Tuesday  Wednesday  Thursday  Friday

**Parent's Day Out: 2 ½ - 3 ½ year old 9:00-11:30am Half Day 9:00-2:30pm Full Day**

Monday  Half Day  Full Day Tuesday  Half Day  Full Day

Wednesday  Half Day  Full Day Thursday  Half Day

**Preschool: Students who are 3 or 4 by September 1<sup>st</sup> 9:00-11:30am**

*Students must be potty trained and able to use the bathroom independently.*

*My child is reliably potty trained.*  Yes  No

3 Year Old Monday & Wednesday Class  3 Year Old Tuesday & Thursday Class

4 Year Old Monday-Wednesday-Friday Class  4 Year Old Tuesday-Thursday-Friday Class

**Pre-K: 5 years old by October 31<sup>st</sup> 9:00-11:30am Must attend all 4 days to enroll.**

Monday, Tuesday, Wednesday & Thursday

**Friday Discovery: 9:00-11:30am**

Friday

**Extended Day Options:**

Before Care: 8:30-9:00am       Monday    Tuesday    Wednesday    Thursday    Friday

Lunch Bunch: 11:30am-2:30pm       Monday/Wednesday       Tuesday/Thursday (Min. of 2 days per week.)

The undersigned parent (or guardian) hereby enrolls \_\_\_\_\_(Child’s name)  
for the school year (September-May) in Christ Lutheran Early Education Center.

I agree to pay tuition as follows: First payment of \$\_\_\_\_\_ which includes tuition for one month and non-refundable registration fee. Eight equal payments of \$\_\_\_\_\_ will be due on the first of each month starting September 1 and concluding April 1. Payments will be submitted by **check, cash, credit card** or **automatic withdrawal** from checking account. (Circle your option)

I understand that my child may be withdrawn and payments stopped after a 14-day notice is given to the Director in writing. (Any tuition due in arrears will still be payable, even if the child is no longer enrolled.) **I understand that by reason of the necessary commitments of the school, refunds of initial tuition will not be made after May 1 of the enrollment year.**

I understand that the required forms, including a Health Assessment and an Emergency Form must be on file in the Early Education Center office before my child can be admitted to class.

Before me, the undersigned authority, on this day personally appeared know to be the person whose name is subscribed herein, and acknowledged to me that he/she executed the same for the purpose therein expressed.

Sworn and subscribed before me this \_\_\_\_ day of \_\_\_\_\_.

Notary Public in and for \_\_\_\_\_  
County, Kansas.

My commission expires \_\_\_\_\_.

Notary’s Signature \_\_\_\_\_

(Notary seal)

\_\_\_\_\_  
Parent’s Signature

\_\_\_\_\_  
Date

2023/2024 Payment Schedule

September	October	November
December	January	February
March	April	May *

\* Non-refundable tuition