## ST. LUKE'S DAY SCHOOL 2024-2025 APPLICATION FOR ENROLLMENT KALEIDOSCOPE TK

Please complete entire application by filling all blanks (use "none" or "N/A" when appropriate)

Child's	Last Nam	ie		First	Name		Name C	alled		
Child's	Birth Dat	e/			Ag	ge 5 as of 9/1/20	)24 Ge	ender	MALE	FEMALE
Child's	Address _					City		State	Zip	
Primary	y Phone #	t				Home Phone # _			(N/A	A if no landline)
Parent,	/Guardiar	1 Informatio	<u>n</u> N	lother	Father	<u>Parent/Gu</u>	ardian 2 Inforn	nation_	Mother	Father
Name _						Name				
Cell #						Cell #				
Work #	·					Work # _				
E-mail _						E-mail				
Addres	s Sa	me as child (if	not fill o	ut below)		Address	Same as ch	ild (if not t	fill out belo	w)
		? Yes				Yes No Child's current s	Siblings at SLD			No
- Ciliu	currently	emoned in s		163	INO	Cilia s current s				
_	ation Fee			Member Screening		Non-Memb	er - \$100			
Choose	Desired	Programs:								
		scope TK			=	e Full Day*				
	M-F 8:3 \$1,185	0am-2:30pm		M-F \$45		0am, 2:30-5:30	pm			
				*mı	ust be enro	olled in TK; minim	um enrollment r	nust be me	t	
notices and end end Septem amoun charged of the se	will be so rollment nber 2024 ts are nor d. Kaleido school ye	ent by 3/8/24 must be confi tuition depo n-refundable oscope TK is in ar. Credit is n	. I unders rmed or sit – 4/10 once paid ntended ot given	stand than declined b 0/2024, M d. I unders to be a ni for a child	t if my ch by 3/27/2 ay 2025 t stand tha ne-mont d's absen	information. I u ild is accepted, 4 at 5:30pm. If tuition deposit- at if my child is p h commitment ce or days the s children regardle	the Registration confirmed, oth 5/3/2024, Act colored on the vand each tuition chool is not in	on Fee will er charges divity/Supp waiting list on paymen session. C	be charged will occur ly Fee – 9/ , no monie nt represer children's ir	d on 3/13/24 as follows: 5/2024. All s will be ats one-ninth nmunization
						=				
Parent	's Signatu	ire 			For C	D Office Use Only	ate			
Date Re	c'd_	Start	Date		Progr			Input		
SIB	Acpt	WL	Forms	Tchr	EM			Ledger		

## KALEIDOSCOPE TK - 2024-2025 APPLICATION FOR ENROLLMENT - Page 2

Child's Name	Birth Date	P	rogram		
St. Luke's enrolls a limited number of children allergies. Answering "yes" to any of the follow additional documentation later in the registrat complete.	ing questions doe	es not necessarily pr	reclude enrollmen	nt and will re	equire
Does your child have any identified allergies?	Yes No	If yes, are these for	ood allergies?	Yes No	o N/A
If yes, please describe the nature of the allergi	es:				
Has your child had any identified medical need			sly)? Yes	No	
If yes, please describe the nature of the medic	al need or condit	ion:			
Has your child had any identified development  If yes, please describe the nature of these nee		special needs (curre	ntly or previously	r)? Yes	No
Has your child received any kind of therapy in If yes, please describe the nature of the therap		nonths? Yes	No		
Initials Date					

# St. Luke's Day School Payment Information & Electronic Funds Transfer Authorization 2024-2025 School Year

PAYOR INFORMAT	TION:	
Payor Name		Email Address
Payment for Child(ren) (F	First and Last Name)	
CHOOSE METHOD	OF PAYMENT (Choose one)	
Currently Enro	olled 2023-24 School Year – USE P	AYMENT METHOD ON FILE
АСН		
Accountholder Name		Phone #
Address, City, State, Zip		
Routing Number	Account Number (include all leading ze	Checking Saving eros)
Bank or Credit Union Na	me Bank or Credit Union	Address
Please note: Monthly	tuition payments made via ACH are eligib	le for a 2% discount. Fees are not eligible for discou
CREDIT CARD	SLDS accepts Visa, Mast	erCard, and American Express
Cardholder Name		Phone #
Billing Address, City, Stat	e, Zip	
Account Number		Expiration Date
St. Li		ation Fee only. Application must be hand-delivered ons for further payment deadlines and information selected.)
initiate credit card cl the agreement, I am	harges to the above-referenced credit	entries to my checking or savings account (ACH card account. To properly affect the cancellatice. Credit Union members: please contact you tomatic payments.
Payor Signature		

# St. Luke's Day School Checklist – 2024-2025 School Year

# **Registration Priority:**