



LAKE TAPPS
CHRISTIAN
PRESCHOOL &
KINDERGARTEN



GOALS FOR LAKE TAPPS CHRISTIAN PRESCHOOL & KINDERGARTEN

Our goal is to aid in the mental, physical, emotional, social and spiritual development of each child.

We desire to instill in them a value system consistent with the Word of God. We hope to achieve this in a caring environment which will provide each child with the freedom to explore and grow with encouragement and acceptance from the staff. We will work together to help the children reach their highest potential. We will delight in how God has gifted each child with a unique personality, and we will strive to learn from one another.

Learning and developing can be fun and exciting. We will be pleased to play a role in this growth. With Christ as our guide and through the patterns He has set forth, it is our hope that together, we can make a difference for children, church and community.

ENROLLMENT POLICY

Lake Tapps Christian Preschool & Kindergarten, Bonney Lake, Washington, admits students of any race, color, national and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, and other school-administered programs.

AGES:

A child must be at least three (3) years old by August 31 of the year he/she enrolls in the three year old programs.

A child must be at least four (4) years old by August 31 of the year he/she enrolls in the four year old programs.

A child must be at least five (5) years old by August 31 of the year he/she enrolls in the Kindergarten program.

CLASS SIZES:

All preschool programs' class size shall be limited to a maximum of 12 students.

Kindergarten class size shall be limited to a maximum of 14 students.

ENROLLMENT CONDITIONS:

1. All children will automatically be on a one month trial basis.
2. Each child shall be allowed to attend one class.
3. All children must be fully potty trained.
4. A waiting list shall be kept to fill vacancies.

Registration Information

Thank you for your interest in Lake Tapps Christian Preschool & Kindergarten. Enclosed you will find registration information. Application forms and registration fee (non-refundable) must be returned to the school to secure a place for your child. Enrollment for current preschool families begins the first week of February. Open enrollment for any new family begins February 13th.

Following are the fees for the 2012-2013 school year:

REGISTRATION FEE is \$95.00 (non-refundable) for all preschool classes.
\$125.00 (non-refundable) for all kindergarten classes

Three Year Old Classes: Monday/Wednesday 9-11:30 AM & 12:15-2:45 PM
Tuesday/Thursday 9-11:30 AM & 12:15-2:45 PM.

Tuition is \$1,200.00 per year, payable in 10 consecutive monthly payments of \$120.00, August through May.

Four Year Old Classes:

Three Days / Week - Monday/Tuesday/Thursday, 9-11:30 AM. & 12:15-2:45 PM.

Tuition is \$1,550.00 per year, payable in 10 consecutive monthly payments of \$155.00, August through May.

Four Days / Week - Tuesday through Friday, 9-11:30 AM & 12:15-2:45 PM.

Tuition is \$1,800.00 per year, payable in 10 consecutive monthly payments of \$180.00, August through May.

Kindergarten Classes: Monday through Friday, 9:00AM-2:45 PM

Tuition is \$3950.00 per year, payable in 10 consecutive monthly payments of \$395.00, August through May.

Tuition payments are due on the first school day of each month, excluding the August payment which is due on the first of the month. Family rates are available at the following discount. 1st child/ no discount

2 or more/ 10% discount per each additional child

Please review the enclosed admission standards and enrollment procedures. If you have any questions, do not hesitate to contact us.

In His Service,

Connie Wilson
253-891-0960

INFORMATION ABOUT YOUR CHILD

Name your child would like to be called at school: _____

Does your child have any areas requiring special attention? _____

Date of most recent hearing test: _____ Where: _____

Have you any recommendation for your child's discipline? _____

Does your child prefer LEFT hand _____ RIGHT hand _____

Has your child attended (or do they attend)

Daycare ____ Preschool ____ Kindergarten ____ Sunday school ____

Any special groups such music, art, dance, swimming _____

Church you attend (if you do)? _____

WHO WILL TRANSPORT YOUR CHILD TO SCHOOL? _____

List names of those authorized to take your child from school:

Name _____ Phone _____ Rel. _____

Name _____ Phone _____ Rel. _____

If you work, who is your babysitter?

Name _____ Phone _____

Does your child have permission to go on field trips? You will always be notified.

Parent's signature _____ Date _____

ABOUT YOUR CHILD:

Please circle if your child has any of the following conditions and indicate any special management at school:

Diabetes, seizure disorder, heart disease, kidney disease, blood disease, asthma, reduced vision, other: _____

Allergies: _____

Special management: _____

Please list any medication your child takes regularly:

Name of med. _____ How often: _____

I hereby authorize Lake Tapps Christian Preschool & Kindergarten to call my family doctor for my child in case of sudden illness or accident. If unable to reach said doctor, I give my permission for my child to be taken to the nearest hospital (Good Samaritan – Puyallup, WA)

Parent's Signature _____ Date _____

Statement of Cooperation

In making application for my child, it is my desire to have him/her complete the school year 20__ – 20__. I also understand it is the policy of the school to make no refunds on registration fees.

I give permission for my child to take part in all school activities, including all school sponsored trips away from the school, understanding I will be notified before hand.

I absolve the school from liability to me or my child because of any injury to my child at school or during a school activity.

I will support and uphold the ideals of the school and abide by the policies set forth, and will not participate in destructive criticism toward teachers or administration, to my child or others, but will deal with problems directly with the teacher or administration in a Christian manner as indicated in Matthew 18:15.

I pledge to pay my financial obligation to Lake Tapps Christian Preschool & Kindergarten on the date due.

Signature of Parent/Guardian _____ Date _____

PLEASE READ AND INITIAL:

The August tuition payment is due on August 1st and is non-refundable

Please initial _____