



ST. PETER'S

EV. LUTHERAN CHURCH, SCHOOL AND EARLY CHILDHOOD CENTER

23120 Gratiot • Eastpointe • MI 48021 • (586) 447-9280 • www.stpeterslutheranchurch.net

Office Use Only	
Date Paid	_____
Preschool Registration	_____
First Week's Preschool	_____
CC Cash	Check # _____
Taken By _____	

2023-2024 Preschool Registration Form

As of _____ St. Peter's Lutheran Early Childhood Center agrees to provide childcare or preschool services for the following named child:

Printed Name of Child _____ Gender: M F _____ Date of Birth _____

Parent/Guardian 1
 Name _____
 Address _____
 Phone _____
Relation: Father Mother Guardian

Parent/Guardian 2
 Name _____
 Address _____
 Phone _____
Relation: Father Mother Guardian

Email you prefer invoice to be sent to _____

I am contracting the following days and hours:

Traditional Preschool: (please circle)

3 year olds
 Tuesday and Thursday AM

4 year olds
 Monday, Wednesday, Friday AM

Full Day Preschool: 3 year old 4 year old

(Please fill in hours)
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday _____ to _____

Tuition/Childcare Fee is due prior to the week of preschool/care. I agree to pay weekly according to my child's fee schedule. I will pay this amount no later than Monday by 5:30pm for that week of care unless I have made other arrangements with the director. Upon signing this agreement, the parents, legal guardian or responsible adult and the childcare facility agree to abide by all of the provisions contained in this contract.

Registration fee is nonrefundable.

In witness whereof, the parties hereto have executed this contract as of the specified date above:

Parent, Legal Guardian or Responsible Adult

St. Peter's Lutheran Early Childhood Center

 Signature

 Printed Name

 Relationship to Child

 Signature
 Kimberly Romano, Director

Come and grow with us!