

Shepherd of the Valley Lutheran Preschool Program Enrollment Contract 2026-2027

Student _____ Male Female
Last Name (Legal) First Name Middle

Date of Birth ____/____/____ **Student must be 3 years old by 9/1/2026**
mm dd yyyy

Parent(s)/Guardian(s):

Parent 1: _____ Legal Custody: Yes No
Last Name (Legal) First Name Middle

Parent 2: _____ Legal Custody: Yes No
Last Name (Legal) First Name Middle

Home Address:

Parent 1: _____ () _____ Yes No
Street City, Zip Code Telephone Child Resides

Parent 2: _____ () _____ Yes No
Street City, Zip Code Telephone Child Resides

Email/Parent 1: _____ Email/Parent 2: _____

Fee Schedule for 2026-2027

Registration Fee: \$425 (\$475 after March 31st)

Registration fee must be paid upon enrollment and is non-refundable.

Initial _____

Annual Tuition Rates*:	<u>Half Day</u> <small>(9:00 a.m. - 12:45 p.m.)</small>	<u>School Day</u> <small>(9:00 a.m. - 2:45 p.m.)</small>	<u>Extended Day</u> <small>(9:00 a.m. - 6:00 p.m.)</small>
3-Day Program M/W/F	<input type="checkbox"/> \$ 6,300	<input type="checkbox"/> \$ 7,800	<input type="checkbox"/> \$ 10,200
5-Day Program M-F	<input type="checkbox"/> \$ 9,500	<input type="checkbox"/> \$ 10,950	<input type="checkbox"/> \$ 15,500

*Automated payments from bank required for tuition and fees.

Annual tuition fees may be paid in ten (10) equal installments. A Security Deposit equal to one month's tuition installment must be paid by July 10, 2026 or the day of enrollment.

This deposit will be applied to the last month's tuition. **The remaining nine (9) payments will be from September 1, 2026 through May 1, 2027.** There is no reduction for shortened months or refunds for days missed due to illness or vacation.

Initial _____

Tuition installments will be withdrawn on the first (1st) day of the month. There is a \$30 charge for payments made after the 5th and all returned payments. Automated payments from a bank checking account are required for all charges.

Initial _____

Early care 8:00 - 9:00 a.m. (\$10 charge for drop-offs before 8:45 a.m.)/Aftercare is billed depending on pick-up time (\$25 charge for sign-outs 15 minutes or more after scheduled pick-up time). Charges for early/after care will be automatically withdrawn from your bank account on the 10th of the following month.

Initial _____

Pull up changing fees (if necessary) will be billed with your tuition every month. Generally, to enter Preschool, a child must be 2 years old and toilet trained. However, if not potty trained, there will be an additional fee charged.

Please check the monthly fee that applies:

- \$120 per month for 5-Day Enrollment
- \$ 80 per month for 3-Day Enrollment
- Not Applicable

Initial_____

Upon continued independent toilet use for two weeks by the child at preschool, the fee will be removed. Please note that we require that the family provide all supplies for their child. (ex. Pull-ups, wipes, etc.) Our goal is to assist parents in the process of toilet training.

Parent Handbook

I have reviewed a copy of the Shepherd of the Valley Lutheran Preschool Parent/Student Handbook. I understand that the preschool is subject to General Licensing Requirements and that the Department has the inspection authority specified in Health and Safety Code and has the authority to interview children or staff without prior consent. Please see the handbook for more details. (The handbook is available online at www.sovls.org; there is also a printed copy available in the office.)

Initial_____

I understand and accept the school policy requirements for payment of school fees and charges as well as student conduct and behavioral performance. Satisfactory compliance with all such requirements is a condition for student attendance at this school. The School Board reserves the right to revise policies and procedures upon thirty (30) days written notice.

Initial_____

Please indicate parties responsible for tuition payment: Parent 1 Parent 2 Guardian
Parent/Guardian Signature: (All responsible parties are required to sign.)

Parent 1: _____ Date _____

Parent 2: _____ Date _____

Guardian: _____ Date _____

Office Use Only	
Accepted by: _____ <small>Director</small>	Date _____