



Inspired by Faith  
Preparing for Success

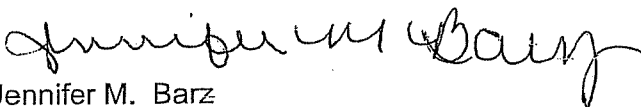
Dear Preschool Families,

While we have an online system for registering via Sycamore, the state requires specific paper documentation. **Please complete both the online and paper documents no later than November 17th.**

The online portal will open on **November 1** and close on **November 17th**.  
The paper documents can be filled out now, and returned to the school office anytime between **November 1st - November 17th**.

Registration is considered complete when both the online and the paper registrations are submitted.

Thank you for your attention to this,

  
Jennifer M. Barz

# OUR LADY OF LOURDES PRESCHOOL

October 17, 2017

Dear Parents,

Thank you for your interest in the Our Lady of Lourdes Preschool Program.

We will be accepting registration forms from November 1 thru November 17, 2017. We will be letting parents know if their child made it into our program *by* January 31, 2018. If the program does not fill up between the November 1 thru November 17, 2017 deadline we will continue to accept applications as they come in, based on the criteria in place. This year we will first be accepting children that will turn 4 years old by August 1, 2018. After we have accepted all 4 year olds that have applied and met the criteria we will then be accepting 3-year olds that will be 4 years old by October 31, 2018. If you have any questions please feel free to give us a call.

502-893-5881

Thank you,

Ms. Maggie Hagan

Director of Preschool

# OUR LADY OF LOURDES PRESCHOOL 2018/19

## REGISTRATION ACCEPTANCE PROCEDURES

1. Children who will turn 4 years old by August 1, 2018, whose parents are active members in order of date of registration into the parish.
2. *Active* defined as intention card signed and submitted and parishioner honoring intention to parish
3. Children who will turn 4 years old by October 31, 2018 whose parents are active members in order of registration into the parish. ( See definition of *Active* above)
4. Families that have other children attending Our Lady of Lourdes School.
5. Non active parishioners by date of registration into the parish.
6. Non parishioners in order of when applications are returned.

**AFTERSCHOOL CARE AND PRE-SCHOOL PROGRAM**  
**MONTHLY TUITION, FEES, RATES AND PAYMENT**  
**SCHEDULE**  
**2018/2019**

Fees, rates or tuition are based on enrollment, not attendance. Charges will be incurred according to the number of days or program you have committed your child to attend. No adjustments will be made due to illness or vacations.

There will be 10 equal payments with the **first payment due by the 31<sup>st</sup> of August. The remaining payments are due by the 15<sup>th</sup> of each month Sept. thru May**. All payments will automatically get deducted from your account unless you are paying the whole amount or paying a ½ year.

**After School Care**

<b><u>Annual Registration Fee Per Child</u></b>	\$75.00
<b>AFTERCARE RATES</b>	
<u>Grades K - 8</u> 3:00 - 6:00 p.m.	\$278.00 / 5 days-a wk.
	\$204.00 / 3 days a wk.
<b>Thursdays only</b> 1:00-6:00 p.m.	\$81.00 per month

**Preschool**  
***5 Day Program only***

<b><u>Annual Registration Fee Per Child</u></b>	\$75.00
<b>TUITION RATES</b>	
7:15 a.m. - 6:00 p.m.	\$538.00
7:15 a.m. - 1:00 p.m.	\$438.00

There is a yearly \$5.00 PTO fee

With the exception of a Thursday only, there is a \$15.00 discount for each additional child.

**\*\*REFER TO YOUR HANDBOOK FOR THE FEES DUE TO INSUFFICIENT FUNDS OF PAYMENT OR LATE PICK UP OF YOUR CHILDREN FROM THE CENTER.**

**If you have any questions please contact Ms. Maggie Hagan or Ms. Teresa Roehrig  
893-5881**

**Our Lady of Lourdes Preschool Program**

**2018-2019**

***Registration Fee \$75.00 per Child***

**Information about Child**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Birthdate: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_ Age as of 8-1-18: \_\_\_\_\_

**Parent Information**

Mother's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell # \_\_\_\_\_

Mother's Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip \_\_\_\_\_

Father's Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell # \_\_\_\_\_

Father's Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

E-Mail address \_\_\_\_\_ E-Mail address \_\_\_\_\_

**Persons authorized to pick up your child other than parents**

Person One: \_\_\_\_\_ Ph#: \_\_\_\_\_ Relation: \_\_\_\_\_

Person Two: \_\_\_\_\_ Ph#: \_\_\_\_\_ Relation: \_\_\_\_\_

Person Three: \_\_\_\_\_ Ph#: \_\_\_\_\_ Relation: \_\_\_\_\_

Person Four: \_\_\_\_\_ Ph#: \_\_\_\_\_ Relation: \_\_\_\_\_

**Emergency Numbers other than parents (Must list at least two)**

Contact One: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contact Two: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contact Three: \_\_\_\_\_ Phone #: \_\_\_\_\_

My child will be attending: 7:15 to 6:00 or 7:15 to 1:00 5 days a week

Do you intend for your child to attend Our Lady of Lourdes School grades Kindergarten through 8<sup>th</sup> grade?  
YES \_\_\_\_\_ NO \_\_\_\_\_

Do you have other children that are already attending Our Lady of Lourdes school Yes \_\_\_\_\_ No \_\_\_\_\_

**Our Lady of Lourdes Aftercare/Pre-School Program**  
**Medical Release Form**

I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the Aftercare/Pre-School Program.

I hereby grant permission for the Director or person placed in charge by the Director to take whatever steps may be necessary to obtain emergency medical care.

The steps may include, but are not limited to the following:

1. Attempt to contact a parent or guardian, the child's physician, or the persons listed in the emergency contact list on the registration form.
2. If we cannot contact your or your child's physician, we will do one or both of the following: (a) call another physician or paramedics (b) have the child taken to an emergency hospital by ambulance in the company of a staff member. In no instance will the child be transported by a staff member's vehicle.
3. Any expenses incurred under 2, above, will be borne by the child's family.
4. The Program will not be responsible for anything that happens as a result of false information given at the time of the enrollment.
5. The Program will not assume responsibility for a child who has not been registered in the Aftercare/Pre-School Program or who has not reported to the staff that day.

Does your Child have any physical condition(s) or allergies of which we should be made aware?  
Yes \_\_\_ No \_\_\_ If "Yes," please explain.

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Hospital \_\_\_\_\_ Phone \_\_\_\_\_

Signed (Mother) \_\_\_\_\_ Date \_\_\_\_\_

or

Signed (Father) \_\_\_\_\_ Date \_\_\_\_\_

Our Lady of Lourdes  
Preschool/Aftercare  
510 Breckenridge lane- Louisville Ky. 40207

Preschool Monthly Tuition	\$538.00 / 7:15-6:00 or	\$438.00 / 7:15-1:00
Aftercare Monthly Rates	\$278.00 / 5 day week or	\$204.00 / 3 day week
Thursday Only Monthly Rates	\$81.00	

There is a \$15.00 discount for each additional child with the exception of Thursdays only

Please choose by which method you will be paying your child/children's monthly tuition or rates for the 2018-2019 school year. You must choose one of the following three methods:

- Payment in full for the entire year, to be paid by August 31, 2018
- Two payments to be paid: ½ of total by August 31, 2018  
with remaining ½ due on January 31, 2019
- Monthly payments done through automatic deduction, when choosing this option the form below must be completed.

**AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL**

Name (Please print) \_\_\_\_\_

I authorize that \$ \_\_\_\_\_ be deducted for payment of Preschool/Aftercare.  
This deduction will occur monthly on the 15<sup>th</sup> of the month, Sept. through May.  
August auto deduction will be done on August 31, 2018

From my  Checking Account  Savings Account

This authority is to remain in full force and effect until Our Lady of Lourdes has received written notification from me (or either of us) of its termination in such time and manner as to afford Our Lady of Lourdes and the financial institution a reasonable opportunity to act on it.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

ATTACH "VOIDED" CHECK HERE