



Lake Stevens Cooperative Preschool

**** New Location to Be Announced Soon **** (425) 397-0487
www.thelakestevenspreschool.org Mailing address: PO Box
432, Lake Stevens, WA 98258

Date deposit received: _____

Check # _____

Cash (initial) _____

2019-2020 Preregistration Form

2's Class

2 yrs old by August 31st

**Thursday & Friday
9:30-11:30AM**

Tuition \$90/month (9 payments)*

3's Class

3 yrs old by August 31st

**Monday-Wednesday
9:30-11:30AM**

Tuition \$150/month (9 payments)*

4's Class

4 yrs old by August 31st

**Monday-Wednesday
12:00-2:30PM**

Tuition \$165/month (9 payments)*

****For all classes: \$70 non-refundable, one-time registration fee is due upon receipt of this form in order to hold your place.***

- Class Participation: One day per week to cover a work area, as arranged by the classroom teacher.
- Member Job: Hold a member job/committee position, or serve as an officer on the Board.
- Meetings: In addition to the Fall Orientation, attend monthly evening meetings that include both business and EdCC education portions.
- Fundraising: Support fundraising by helping to run approved fundraising event(s); participate in event(s) to earn commitment funds, or choose a buy-out option.
- Weekend Cleaning: Commit to clean/organize (in the classroom or storage) 2-3 times per year.
- Snack: Provide a snack for your child each school day.
- Withdrawal: Give 2 weeks' notice if withdrawing from the program, and fully participate in commitments during those two weeks.

☐ **2's Class** Circle work-day preference: *Thursday Friday*

☐ **3's Class** Circle work-day preference: *Monday Tuesday Wednesday*

☐ **4's Class** Circle work-day preference: *Monday Tuesday Wednesday*

Child's Name: _____ Date of Birth: _____

Parent Name(s): _____

Address: _____

Home Phone #: _____ If a cell, OK to text? YES NO

Cell Phone #: _____ OK to text? YES NO

Email: _____

☐ Check here if you would like to *request* a younger (walking) sibling to attend on your workdays. This is as *space allows*, and requires an additional \$20/month. Sibling name & age: _____

Signature: _____ Date: _____

How did you find out about our preschool?: _____

NOTICE OF NONDISCRIMINATION POLICY AS TO STUDENTS: This preschool admits students of any race, color, national and ethnic origin to all rights privileges, programs and activities made available to students. It does not discriminate on the basis of race, color, national and ethnic origin in administration of educational policies, admissions, scholarships, and other school administered programs.