

**Lake Forest High School**  
***Little Scouts Pre-School Program***

**Half-Day Pre-School**  
***Three and Four-Year-Old Morning Program***  
**2008-2009 REGISTRATION FORM**

Date Received \_\_\_\_\_

Desired Start Date: \_\_\_\_\_

**REGISTRATION:**

Fill out and return this application along with a **\$100.00 non-refundable registration fee**.

Name of Applicant: *(last)* \_\_\_\_\_ *(first)* \_\_\_\_\_ *(nickname)* \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Home Phone \_\_\_\_\_

I would like my child to attend: M T W Th F (circle days) Hours: 8:30 a.m. to 11:30 a.m.

**FAMILY INFORMATION**

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Business Name & Position: \_\_\_\_\_

Business Name & Position: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Parent's Marital Status:  Married  Single  Divorced  Separated  Widowed  Re-Married

Names and ages of other children in the family:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name and Phone numbers of Person(s) to contact in case a parent cannot be reached that are within a 30 min driving distance.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**IF MY CHILD IS ACCEPTED, I UNDERSTAND AND AGREE TO THE FOLLOWING:**

**SECURITY DEPOSIT:** A one-month security deposit is due with acceptance to our program and will be applied towards the last month tuition payment provided a one month written notice is given.

**TUITION:** Tuition amounts vary for part-time programs and ages under 3 years. Please see separate price sheet. Tuition payments are due on the 24th of each month for the following month. We accept Visa or Master Card. Lake Forest High School employees are encouraged to pay through monthly payroll deductions. If paying by check, make payable to: **LFHS**. Please send registration to: **LFHS Little Scouts, 1285 N. McKinley Road, Lake Forest, IL 60045.**

Amount Paid \$ \_\_\_\_\_ (*includes \$100.00 registration fee*) check # \_\_\_\_\_ date received \_\_\_\_\_

- Transportation to and from Little Scouts Pre-School is the responsibility of the parent. Late fees apply for a pick up after the designated release time.
- It is presumed that the child is enrolled for the full academic year. If withdrawal from the program is necessary a **one-month written notice is required.**

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date