

**CELEBRATION PRESCHOOL  
At Christ Lutheran Church  
APPLICATION FORM  
www.celebrationpreschool.com  
2016-2017**

\_\_\_ **Presently Enrolled/Returning Family** \_\_\_ **Church Member** \_\_\_ **New Family**  
Please check the appropriate line above

Child's Name \_\_\_\_\_  
First Middle Last

Date of birth \_\_\_\_\_ Male / Female (please circle)  
MM/DD/YY

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

Home Address \_\_\_\_\_  
Street Town Zip

email \_\_\_\_\_ Home Phone \_\_\_\_\_

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

Home Address \_\_\_\_\_  
Street Town Zip

email \_\_\_\_\_ Home Phone \_\_\_\_\_

Father's Work/Cell# \_\_\_\_\_ Mother's Work/Cell # \_\_\_\_\_

**Please check all boxes that apply.**

**Five+ Program  
Monday Tuesday, Wednesday, Thursday  
\$450.00 per month**

AM Program 8:30AM to 11:30AM

PM Program 12:30 PM to 3:30PM

Will be attending Kindergarten at \_\_\_\_\_

Will not be attending Kindergarten

**Applications are accepted BY MAIL ONLY and should be postmarked NO EARLIER than  
December 5, 2015;**

**MUST BE 5 BY SEPTEMBER 1, 2015**

**Mail to: Celebration Preschool 60 55<sup>th</sup> Street, Clarendon Hills, Illinois 60514.**

**Please submit a \$200.00 deposit with your application form. This will be applied to your first month's tuition.**

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Date Application received \_\_\_\_\_ Deposit Check # & amount \_\_\_\_\_ Balance Check # & amount \_\_\_\_\_