

**LP ACC Edu-Care Preschool
Enrollment Application**

200 Ninth Street ♦ Peru, IL 61354
(815) 223-2454 (Ext. 11)

Student Information:

First, Middle, and Last Name of Child

Gender (Male/Female)

Preferred Name/Nickname

Birthdate – Month/Day/Year

Street Address

City

Zip Code

Phone

Parent(s)/Guardian(s) Information:

Mother's First and Last Name

Street Address if different from child

Mother's Phone

E-mail

Father's First and Last Name

Street Address if different from child

Father's Phone

E-mail

Sessions:

*Please place an X beside the session that you prefer to register for. Both sessions will be in attendance November to Mid-May and meet every **Monday/Wednesday/Friday** unless otherwise indicated on the monthly calendar*

____ AM Session 8:30 am-11:00 am (Wed. 8:30 am - 10:30 am)

____ PM Session 1:00 pm-2:30 pm (Wed. 12:30 pm - 1:30 pm)

Tuition: 2 Options

Please place an X beside the session that you prefer to register for

- \$25 per month due on the **first of each month** for 7 months (November to May)
- OR
- One-time payment of \$175 due by November 1

Cash, check, and credit card accepted for either tuition option