



# LEARNING DYNAMICS PRESCHOOL

### For 4-Year Olds Only

Circle the Learning Dynamics  
Reading Books you already have:  
*None Blue Red*  
*Yellow Green*

Office Use Only:

Day: \_\_\_\_\_ Time: \_\_\_\_\_  
Teacher: \_\_\_\_\_

## Preschool Registration Form - August thru May

Child's Name: \_\_\_\_\_

Name for Bag: \_\_\_\_\_

Current Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Sex:  Male  Female

Medical Information/Conditions: \_\_\_\_\_

Home Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Secondary Emergency Contact:** (other than parents)

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

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

### Classroom / Program:

- Mini 3's
- 3-year old program
- 4-year old program
- MWF
- TTH
- AM (9:00 - 11:15)
- PM (12:00 - 2:15)

- KE - TTH
- AM (9:00 - 11:00)
- PM (12:30 - 2:30)

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

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

Cell Phone: \_\_\_\_\_

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

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

Cell Phone: \_\_\_\_\_

Parent Email (required) \_\_\_\_\_

### Tuition and Fees:

Initial:

_____ Monthly tuition	\$ _____
_____ Monthly service fee for CC/ACH	\$ _____
_____ Book fee (Due in October) (53 books - blue, red, yellow, green sets)	\$90.00
_____ CD and flashcards (Due in October)	\$22.00
_____ Early Withdrawal Fee	\$50.00

### Registration Today:

Initial:

_____ Registration fee (this fee is a non-refundable fee)	\$ _____
_____ August Tuition (non-refundable after May 1)	\$ _____
_____ Other: _____	\$ _____
Total Paid:	\$ _____

I give permission for my child to participate in school activities and will not hold the school responsible for any injuries or accidents that may occur at the school or on its property. I agree to pay tuition by the first week of every month. I understand that I will not get credit or reimbursement from the school for days missed. Teachers are subject to change. I also acknowledge that Learning Dynamics ("LD") will periodically take, and own, visual images of classrooms, groups, and children, including possibly my child, doing activities at Learning Dynamics and grant permission for these images to be used for LD marketing purposes without compensation to me or my child and release LD from any liability in connection with the use of these images. I also acknowledge that periodically toilet accidents occur; in the event that such an accident occurs with my child, I give LD (two people present) permission to change my child's clothes if necessary.

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

Date: \_\_\_\_\_