

**Covenant Presbyterian Church Preschool**  
6323 West 80<sup>th</sup> Street • Los Angeles, CA 90045  
(310) 670-5758 • Email: cpnsyskl@pacbell.net

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**COVENANT PRESCHOOL** is a self-supporting, non-profit part of Covenant Presbyterian Church, licensed by the State Department of Social Services. All preschool children, regardless of race, religion or ancestry, are welcome.

**HOURS:** 9:00 a.m. - 12:00 noon.

**Extended Days:** 12:00 noon - 2:00 p.m. Available Wednesday and Thursday (\$18 per day).

**SCHOOL CALENDAR:** September to mid-June with Christmas & Spring breaks. Summer Program is available.

**PROGRAM:** Developmentally appropriate curriculum includes art, music, science, dramatic play, story time, indoor and outdoor play.

**PARENT PARTICIPATION:** Parents are encouraged to attend Back to School Night. Appointments may be made for personal conferences at any time. Parent-Teacher conferences are held in the Spring. Volunteer opportunities are available.

**IMMUNIZATIONS:** A physician's report is required prior to enrollment. Children without the required immunizations will not be allowed to attend unless a waiver is signed.

**AGES:** 2 through 5 years (or until eligible for kindergarten). **CHILD MUST BE FULLY POTTY TRAINED.**

**REGISTRATION FEE:** Your child's name will be placed on our Waiting List as soon as the \$55 non-refundable registration fee is paid. This fee is not applicable to tuition. Please advise us of any address or phone changes after application is filed.

**TUITION for Sept. 2011 - June 2012:**           \$225 per month for Tuesday/Thursday enrollment  
  \$345 per month for Monday/Wednesday/Friday enrollment  
  \$560 per month for Monday through Friday enrollment

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**APPLICATION FOR ENROLLMENT (please print or type)**

CHILD'S NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_ CELL PHONE \_\_\_\_\_

ZIP \_\_\_\_\_ SEX \_\_\_\_\_ Referred By \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ MOTHER'S NAME \_\_\_\_\_

DATE \_\_\_\_\_ EMAIL \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian

Please cut off lower portion of this form and return **with \$55 non-refundable registration fee** to:

Covenant Presbyterian Church Preschool, 6323 W. 80th Street, Los Angeles 90045. Retain upper portion for your information.

*Office Use Only*

| REG. FEE REC'D. | CLASS/DAYS | INTERVIEW | SEPT TUITION | VISITING TIME |
|-----------------|------------|-----------|--------------|---------------|
| _____           | _____      | _____     | _____        | _____         |
| _____           | _____      | _____     | _____        | _____         |

**ENROLLMENT DATE** \_\_\_\_\_  
Office Use Only