



2665 North Street, East Troy, WI 53120, School: (262) 642-3202

2026-2027 3K Registration Form

St. Paul's Little Gospel Lights Preschool specializes in developmentally appropriate practices. Our programming balances creativity, academics and learning through play in a nurturing, Christian environment. There are individual, small group, and large group times. There is time to play and time to learn. We offer flexible programming to work around today's families' complex schedules. We feature a low teacher to student ratio. We have trained, experienced, and committed teachers. St. Paul's is fully accredited.

Our 3K programming is available for students turning 3 on or before Sept. 1st and is offered from 7:50 to 2:50. Program placement is contingent upon teacher evaluation and assessment. Children must be fully toilet trained. Students who turn 3 during the school year before 2nd semester may be added if space exists and the teacher approves. There are openings for part-time and full-time students.

*Any 3K students who are not enrolled in before school care should **not** arrive before: morning 7:30AM/ afternoon 12:00PM.

Complete Name of Child: _____ Birthdate: _____

Please check your preferences below:

Please note: 3K students MUST attend a minimum of twice a week/2 half days.

DAYS	Monday	Tuesday	Wednesday	Thursday	Friday
AM 7:50-10:35am					
Sandwich Care 10:35am-12:00pm					
PM 12:00-2:45pm					

Deposit Fee: A **non-refundable** \$100.00 fee will be charged for each student to hold a spot for your child. These fees will go toward your tuition provided no sessions are dropped. This fee is due upon registration or waived if paying in full.

Activity Fee: There is an additional \$40.00 activity fee per student. This fee must be paid on or before registration night in August.

Tuition Costs: \$700.00 per ½ day session per year; or \$1,400.00 for each full day.

Sandwich care during lunch: The cost is \$200.00 **per day** for the school year (each additional lunch hour needed midday). This flat fee **applies only** if your child is doing a **half-day session plus** sandwich care. Sandwich care includes a short class activity, eating lunch and quiet/rest time. We do not have a daily hot lunch program, please provide a *bag lunch* if your child will be staying all day. Milk may be purchased for the year at registration.

Drop-in school during the school day: Cost: \$25.00 per ½ day, \$30.00 per half day including the lunch hour, \$50.00 for a full day (7:50am to 2:45pm)-offered only if space exists.

Before/After School Care (7-7:30am; 2:50-5:30pm)

_____ I'm considering using the before/after school care program. (please check if you are) See BASCP handbook for additional information and rates.

To reserve a space for your child, please **submit** this form and return it to the school office with the non-refundable deposit fee. Note: it is not uncommon for sessions to be filled. School tours are available upon request.

Confirmation of your child's placement and a tuition bill will be sent to you by mid-June. The FACTS payment plan is an automatic withdrawal payment plan that gives you the option of paying tuition in 4, 6, 10, or 12 payments. There is a set-up fee to enroll in the FACTS payment plan, one payment is \$5.00, 2 payments is \$15.00 and more than 2 payments is \$50.00. The 12-month plan begins in July. New families: **Tuition must be paid in full on or before school registration unless** you have enrolled in the FACTS payment plan at <https://online.factsmgt.com> or by calling 1-866-441-4637. If you are enrolling after July 1st, you must pay in full or enroll in the FACTS program as soon as possible to confirm your child's placement. **Your payment in full or enrolling in FACTS confirms your enrollment.** Please plan accordingly.

Fill out both sides of this form and return on or before Friday, March 27th with the non-refundable \$100.00 deposit fee(s). Return to: St. Paul's Lutheran School, 2665 North St., East Troy, WI 53120. Checks should be made out to St. Paul's Lutheran School.

Name of Child

Birth date

Home Church

Baptized? (Yes or No)

Parent(s) or Guardian(s)-please list name(s) as they should appear
in the school directory, i.e. include spouse's name, if applicable.

Phone number

Address

City

Zip Code

e-mail address

Are you considering sending your child to 4K at St. Paul's ____ Yes ____ No

Child's Health History (list allergies, any medical diagnosis/health issues, academic/learning diagnosis, academic needs/concerns*, etc. or list "none"):

*If yes, please be sure to speak with or meet with your child's teacher **before** the school year begins in the fall of 2026.

Please check one:

____ We will be paying in full.

____ We will be enrolling in FACTS.

OFFICE USE ONLY	Date received:
Check number:	Amount Paid: