

Grace Early Childhood Center Enrollment Options

Re-Enrollment New Enrollment

Student name: _____

Male Female

Class Option: Infant Toddler 3-4 Preschool 4-5 Preschool

Days Option (first choice): M-F MW/F T/TH
AM PM Full Day

Days Option (second choice): M-F MW/F T/TH
AM PM Full Day

Full Day only:

Approximate drop off time ____:____ A.M. Approximate pick up time ____:____ P.M.

Applying for Ministry Support Discount: Yes No

If Yes, what church: GBC of Columbus GBC of Powell Attended for how long: _____

Payment Option (choose one)

- Annual Payment (3% discount if paid by July 15, 2010 or 10 days after the date of billing)
- Monthly Payment (equal payments due on the first of each month: September through May for half Day students and July through June for full day students)

Siblings enrolled in Worthington Christian Schools:

Parent e-mail address:

This will be used to send important reminders throughout the year

Email address of financially responsible person:

This will be used to send your monthly invoice.

X _____
Printed name of financially responsible party

X _____
Signature of financially responsible party

Street Address of financially responsible party

City

Zip

By signing, I agree that I have read, understand and will abide by the tuition policy.

OFFICE USE ONLY

Date _____ Family ID _____ Code _____ MSA Approved Y N _____