

Sunbuddies!



APPLICATION FOR ADMISSION 2024

THE EARLY LEARNING CENTER OF WOODLAND CHURCH

5824 Berkley Drive, New Orleans, LA 70131 (504) 394-8781

ashley@wcnola.org www.wcnola.org

Join us for our “Sunbuddies” summer program. Registration will begin on Monday, March 4, 2024, for ELC students. On Monday, March 18, 2023, registration will open to the public. “Sunbuddies” will run for 4 weeks from 9am – 2pm, Monday, July 1, 2024 – Wednesday, July 24, 2024, on Mondays, Tuesdays, and Wednesdays. **The total cost for the program is \$475. Half of the program cost (\$237.50) will be due upon registering. The remaining half of the tuition (\$237.50) is due by July 1st, 2024.****

The total cost of tuition in the amount of \$475 should be paid by July 1, 2024.

****Please circle the class of your choice. The class should reflect your child’s placement at the beginning of the 2023-2024 school year. ****

1 year olds 2 year olds 3 year olds 4 year olds Kindergarten

I hereby apply for the admission of my child to the **Early Learning Center of Woodland Church** for the “Sunbuddies” summer program and submit the following information for your consideration:

Child’s full name: _____

Name by which child is called: _____ Date of Birth: _____ Sex: _____

Address: _____ City: _____ Zip Code: _____

Email addresses: _____

Father’s name: _____ Cell Phone: _____

Employer: _____ Work phone: _____

Mother’s name: _____ Cell Phone: _____

Employer: _____ Work phone: _____

Parents: ___Married ___Divorced ___Widowed ___Other

Who is the primary custodian? _____

Previous Preschool or Mother’s Day Out attendance, if any _____

Is your child potty trained? ___(As a reminder, children in the 3, 4, and kindergarten classes must be completely toilet trained)

Physical/Developmental issues? _____

General Health _____Allergies _____

To which church are you a member if applicable? _____

EMERGENCY CONTACTS (other than parents/guardians):

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

Signature: _____ **Relationship to child:** _____

Date: _____

Office Use Only:

*Registration (\$50) Check no. _____ Date: _____ Amount: _____

*1/2 tuition (\$175) Check no. _____ Date: _____ Amount: _____

*Supply fee (\$75) Check no. _____ Date: _____ Amount: _____

*1/2 tuition (\$175) Check no. _____ Date: _____ Amount: _____

Total Cost: \$475