

Sunbuddies!



APPLICATION FOR ADMISSION 2023

THE EARLY LEARNING CENTER OF WOODLAND CHURCH

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

alice@wcnola.org www.wcnola.org

Join us for our “Sunbuddies” summer program. Registration will begin on Monday, March 6, 2023, for ELC students, and Monday, March 20, 2023, for others. “Sunbuddies” will run for 4 weeks from 9am – 2pm, Wednesday, July 5, 2023 – Thursday, July 27, 2023, on Tuesdays, Wednesdays, and Thursdays, except for the first week. The first week will be held on Wednesday, July 5, Thursday, July 6, and Friday, July 7. **The total cost for the program is \$450. One half of the tuition, \$175, & the \$50 registration fee, \$225 total, is due when registering. The remaining half of the tuition, \$175, and a \$50 supply fee, \$225 total, is due by July 5, 2023. A total of \$450 is due by July 5, 2023.**

****Please circle the class of your choice. The class should reflect your child’s placement at the beginning of the 2022-2023 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? _____

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

Date: _____

Office Use Only:

Registration Check no. _____ Date: _____ Amount: _____

1/2 tuition Check no. _____ Date: _____ Amount: _____

Supply fee Check no. _____ Date: _____ Amount: _____

1/2 tuition Check no. _____ Date: _____ Amount: _____