

Immanuel Lutheran School (ILS)

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Danville, IL 61832

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ILS Registration Form

2021–2022

☐ Preschool Two's

☐ Preschool 3's

☐ Preschool PreK 4's

Please print all info legibly!

Parent/Guardian Information

Parent/Guardian Name: _____ **Cell ph:** _____

Date of Birth: _____ **SSN:** _____ **Home ph:** _____

Email: _____ **Work ph:** _____

Address: _____ **City/State/Zip:** _____

Employer: _____ **Occupation:** _____

Relationship to child: _____ **Church affiliation:** _____

Parent/Guardian Name: _____ **Cell ph:** _____

Date of Birth: _____ **SSN:** _____ **Home ph:** _____

Email: _____ **Work ph:** _____

Address: _____ **City/State/Zip:** _____

Employer: _____ **Occupation:** _____

Relationship to child: _____ **Church affiliation:** _____

Child (student) Information

Child's Full Name: _____ **Preferred Name:** _____

Date of Birth: _____ **SSN:** _____ **Gender:** ☐ male ☐ female

Church of Membership: _____ **Baptized:** ☐ yes (date: _____) ☐ no

Address (if different): _____

Child resides with: ☐ Mother ☐ Father ☐ Both ☐ other: _____

Parents are: ☐ married ☐ separated ☐ divorced ☐ other: _____

Custody Alert: ☐ yes ☐ no **If yes, explain:** _____

Other children in the household (list names/ages): _____

Has your child had previous daycare/preschool experience? _____

Additional info that will help with his/her care: _____

Emergency Information

Does your child have any known health problems? ☐ no ☐ yes: _____

List any regular medications for your child and when they should be given. Please note that prescription and over the counter medications must be in the original bottle/container and only the recommended dosage on the bottle can be administered. Attach another sheet if needed.

Medication: _____ Dose: _____ Time: _____

Medication: _____ Dose: _____ Time: _____

Allergies: _____

Any dietary needs/restrictions: _____

Doctor's Name: _____ Doctor's ph: _____

Please list all emergency contacts in order of priority (including yourself):

	Name:	Relationship to child:	Phone:
1.			
2.			
3.			
4.			
5.			

Authorized Pick Up List

Your child will only be released to the people on this list. If our teacher does not recognize the person picking up your child, a state issued identification card with photo is required, and will be checked with this list.

Name: _____ Cell ph: _____

Relationship to Child: _____ Other ph: _____

Name: _____ Cell ph: _____

Relationship to Child: _____ Other ph: _____

Name: _____ Cell ph: _____

Relationship to Child: _____ Other ph: _____

Name: _____ Cell ph: _____

Relationship to Child: _____ Other ph: _____

Name: _____ Cell ph: _____

Relationship to Child: _____ Other ph: _____

Name: _____ Cell ph: _____

Relationship to Child: _____ Other ph: _____

Parent/Guardian Signature: _____ date: _____



ILS Registration Form 2021–2022 continued

Student Name: _____ Date of Birth: _____

Student Photo Release

I hereby give permission for Immanuel Lutheran School to use my child's photograph, video image, writing, voice recording, name, grade level, and school name in school productions, websites, school social media, and/or similar school sponsored publications or in school or approved media interviews, releases, articles, and photographs. I also provide permission for the release by the school or to the media and governmental entities of my child's name, grade, school, name, and honors my child has received for public announcement of recognition of my student's accomplishments. I understand that without checking the permission box my child's name and photograph cannot and will not be included in any publications or presentations.

- ☐ I give permission for the photo/accomplishment consent as indicated above.
- ☐ I do not give permission for the photo/accomplishment consent as indicated above.

Parent/Guardian Signature: _____ date: _____

Home Language Survey

The state requires the district to collect a Home language Survey for every student. This information is used to count the students whose families speak a language other than English at home. It also helps to identify the need for bilingual and English as a Second Language education services in the schools. Depending upon the answers below, the school may assess your child's English language proficiency. The school may measure your child's listening, speaking, reading, and writing skills in order to connect with helpful services.

1. Does anyone speak a language other than English in daily interaction in your home?
☐ No
☐ Yes. What language? _____
2. Does your son/daughter speak a language other than English in daily interaction?
☐ No
☐ Yes. What language? _____
3. What language did your child first learn to speak? _____

Parent/Guardian Signature: _____ date: _____

DCFS Standards

Immanuel Lutheran School is licensed to operate our Preschool and childcare under the Illinois Department of Children and Family Services (DCFS) and abides by DCFS Standards. A booklet summary of DCFS Standards has been provided to each student's family. Please verify receipt of the DCFS Standards booklet.

- ☐ I hereby certify that I/we have received a copy of a summary of licensing standards printed by the Illinois Department of Children and Family Services.

Parent/Guardian Signature: _____ date: _____

2021 – 2022 Tuition

A registration fee of \$50.00 is due and must be submitted along with completed registration forms in order for the child to actually be registered. No space is reserved in our classes without receipt of registration forms and fee.

Tuition by Enrollment Option

Please note that tuition is assessed by the year and is broken down in 10 equal payments, August to May.

Two's	Preschool 3's and 4's
<input type="checkbox"/> 5 Full Days: \$5400/yr \$540/mo	<input type="checkbox"/> 5 Full Days: \$4800/yr \$480/mo
<input type="checkbox"/> 5 Half Days: \$2800/yr \$280/mo	<input type="checkbox"/> 5 Half Days: \$2600/yr \$260/mo
<input type="checkbox"/> 3 Full Days: \$3600/yr \$360/mo	<input type="checkbox"/> 4 Full Days: \$4300/yr \$430/mo
<input type="checkbox"/> 3 Half Days: \$1800/yr \$180/mo	<input type="checkbox"/> 4 Half Days: \$2300/yr \$230/mo
<input type="checkbox"/> 2 Full Days: \$2400/yr \$240/mo	4 Days are Mon/Tue/Wed/Thur only. Half Days are 8:30 – 11:30. Full Days are 8:30 – 3:00, but include before care/after care: 7:00 am to 5:00 pm
<input type="checkbox"/> 2 Half Days: \$1300/yr \$130/mo	
3 Days are Mon/Wed/ Fri only. 2 Days are Tue/Thur only. Half Days are 8:30 – 11:30. Full Days are 8:30 – 3:00, but include before care/after care: 7:00 am to 5:00 pm	

Certain discounts may be applied (families with multiple children enrolled; members of Immanuel Lutheran Church; etc). Families with income at or below poverty level may apply for Financial Assistance. You must apply for such discounts with our School Director.

Families that pay the full year in advance receive a 5% discount; likewise, families that sign up for automatic payment (Electronic Fund Transfer from your bank account) receive a 5% discount. All other families are to pay monthly by cash or check by the due date each month to avoid a late fee (\$25). A billing statement will go home on the 3rd or 4th of each month (Aug. to May) with a reminder of monthly tuition due as well as lunch and other fees from previous month; payment is due by the 8th of the month (or the Monday following the 8th when the 8th is on a Saturday or Sunday).

Lunch fees will be billed or you can send in payments weekly/monthly (lunch is \$3/day). Likewise, a student can drop in (for example, a 4 day student can drop in on a Friday for an additional fee); or half day students can utilize before care or add an afternoon for an additional fee; all such fees are billed and should be utilized with advance notice to the child's teacher and/or school office.

All checks should be payable to: Immanuel Lutheran School.

- ☐ We plan to make a one-time payment of the full year's tuition on or before Aug. 17, 2021.
- ☐ We plan to make monthly payments using automatic Electronic Fund Transfer from our bank account.
- ☐ We plan to make monthly payments by cash or check.

Parent/Guardian Signature: _____ date: _____

To Complete Your Child's Enrollment at ILS

After payment of registration fee and completion of this registration packet; additional items are needed for the enrollment of your child as a student in Immanuel Lutheran School:

- ☐ Copy of the Child's Birth Certificate (new students only)
- ☐ Health Physical
- ☐ Blood Lead Test
- ☐ Updated Immunization Record
- ☐ Receipt of ILS Family Handbook / calendar
- ☐ Payment of first month's tuition