

**All Seasons Preschool at Inver Glen  
Preschool Registration Form  
2024-2025**

Child's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Child's Age as of September 1 \_\_\_\_ Gender: M F Prefer to self-describe:

Children must be 36 months old and toilet trained by September 1.



**Monthly Tuition**

Full Day 8:30-3:30	Part Day 8:30-11:30
2 Day: \$729	3 Day: \$512
3 Day: \$1002	
4 Day: \$1207	
5 Day: \$1411	

**Extended Day:**  
\$12/hour      \$6/half hour

**Please indicate your preference:**

Full day (minimum of 2 days/week)

Circle days: M T W Th F

Optional Extended Day:

Morning:

7:30-8:00

8:00-8:30

Afternoon:

3:30-4:00

4:00-4:30

Part day (Monday, Wednesday, & Friday)

Optional Extended Day:

Morning:

7:30-8:00

8:00-8:30

Lunch:

11:30-12:30

**Family Information**

Parent / Guardian #1: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Employer/Occupation: \_\_\_\_\_

Parent / Guardian #2: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Employer/Occupation: \_\_\_\_\_

All Seasons Preschool will make every effort to meet the needs of all children enrolled in our program. Information about your child's needs and interests will be gathered at our initial conference prior to the start of the school year. If you believe your child may have educational or health needs that will require additional planning or preparation on the part of the school, please indicate below. If available, please provide a copy of your child's IEP/ICCP.

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How did you hear about our program? \_\_\_\_\_

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A limited amount of tuition assistance is available for those who qualify. Check the box below if you are interested in more information.

Yes, I am interested in learning more about tuition assistance.

Return to All Seasons Preschool with a \$100.00 non-refundable application fee. **Please note that form and fee are required for placement.**

Enclosed is my \$100 application fee.

*Children are placed on a first come, first served basis with priority given to returning families. We will make every effort to honor families' preferences. Families will be notified of enrollment status upon receipt of form.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All Seasons Preschool at Inver Glen  
7260 S Robert Trail  
Inver Grove Heights, MN 55077  
(651) 450-0606

FOR OFFICE USE ONLY:

Date Received: \_\_\_\_\_

Application Fee

Placement date: \_\_\_\_\_