



# Christ Memorial Lutheran Early Childhood Learning Center

Christ Memorial Lutheran ECLC 14200 Memorial Drive - Houston, Texas 77079  
(281) 497-2055 ECLCOFFICE@CMLHOUSTON.ORG www.CMLECLC.org

"Train up a child in the way he should go... and he will not depart from it." Proverbs 22:6

## 2024 - 2025 Enrollment Form - TODDLERS and TWO-YEAR-OLDS

I hereby make an application for the admission of my child to Christ Memorial Lutheran Early Childhood Learning Center for the 2024 - 2025 school term.

Child's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Male/Female  
MM DD YY (Circle One)

Home Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

Mom's Name: \_\_\_\_\_ Mom's Cell #: \_\_\_\_\_

Mom's Occupation: \_\_\_\_\_ Mom's Email: \_\_\_\_\_

Dad's Name: \_\_\_\_\_ Dad's Cell #: \_\_\_\_\_

Dad's Occupation: \_\_\_\_\_ Dad's Email: \_\_\_\_\_

Does your child speak English? \_\_\_\_\_ What language is spoken at home? \_\_\_\_\_

Does your child have preschool experience? \_\_\_\_\_ If so, where? \_\_\_\_\_

Siblings who will be attending CML (please list names & ages): \_\_\_\_\_

Church Affiliation: \_\_\_\_\_ How did you hear about CML? \_\_\_\_\_

What first name would you like on the child's school bag? \_\_\_\_\_

### STUDENT HEALTH

Please list any allergies, existing illnesses, previous serious illnesses/injuries, any hospitalizations during the past 12 months, and/or any medications prescribed for continuous, long-term use.

If applicable, INITIAL \_\_\_\_\_ I will provide a Food Allergy and Anaphylaxis Emergency Care Plan to CML.

### EMERGENCY CONTACT

Person to be contacted in an emergency when the parent(s) cannot be reached.

Name	Address	Cell #	Relationship to Child
<b>RELEASE PERMISSION</b>			
Person(s) other than a parent to whom the child may be released.			
Name	Cell #	Relationship to Child	
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### Fee Schedule (Monthly Rate)

First payment is due September 1st. Tuition is due each month on the 1st and is considered late by the 5th.

#### Morning Session 8:45 am - 12:00 pm

\_\_\_ Two Day Week (T/TH) \$375.00 \_\_\_ Three Day Week (M/W/F) \$430.00 \_\_\_ Five Day Week (M-F) \$530.00

#### Afternoon Lunch Bunch: 12:00 pm - 2:30 pm

To guarantee a spot in Lunch Bunch, please select from the options below.

\_\_\_ Two Day Week (T/TH) \$115.00 \_\_\_ Three Day Week (M/W/F) \$175.00 \_\_\_ Five Day Week (M-F) \$270.00

I have enclosed a \$400.00 Registration Fee plus a \$200.00 deposit to be applied to August 2024 tuition to enroll my child for the 2024-2025 school year. As required by CML's admission policy, the balance of August 2024 is due no later than March 31, 2024. I understand that August 2024 tuition may not be applied to any other month's tuition. **Registration fees and August 2024 tuition are non-refundable. No sibling discounts will be applied to the August tuition. Registration & Deposit Payment \_\_\_ Vanco \_\_\_ Check \_\_\_ Cash**

Parent/Guardian Signed & Acknowledged \_\_\_\_\_ Date \_\_\_\_\_