


CONTACT US:

2315 Villa Road,
Newberg, OR 97132
503-538-3104
mynw.cc/newberg/preschool

APPLICATION: 2021-2022
Preschool Director: Rhonda Rosacker | rhonda@mynw.cc

Thank you for choosing Newberg Christian Preschool. Please return this completed form, along with your check of \$125 for the non-refundable application fee to our office.

Please indicate class preference within your child's grade level:

FIRST STEP CLASS 2 years old by Sept.1st Cost: \$1215/year AM <input type="checkbox"/> Tues/Wed 9:00-11:00 <input type="checkbox"/> Thurs/Fri 9:00-11:00 Cost: \$1125/year PM <input type="checkbox"/> Tues/Wed 12:45-2:45	JUNIOR CLASS 3 years old by Sept.1st Cost: \$1755/year AM <input type="checkbox"/> Tu/Wed/Thur 8:45-11:30am Cost: \$1620/month PM <input type="checkbox"/> Tu/Wed/Thur 12:30-3:15pm	PRE-K CLASS 3 Days Per Week 4 years old by Sept.1st Cost: \$1935/year AM <input type="checkbox"/> Tu/Wed/Thurs 8:45-11:45am Cost: \$1710/year PM <input type="checkbox"/> Tu/Wed/Thur 12:30-3:30pm	PRE-K CLASS 4 Days Per Week 4 years old by Sept.1st Cost: \$2250/year <input type="checkbox"/> Tu/Wed/Thurs/Fri 8:45-11:45am
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Note: Tuition can be paid in one payment or divided over a 9 month (September through May) payment schedule.

Child's Name: _____ **Birthdate:** _____

Age on September 1st: _____ **Gender:** _____ **Preferred Name:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Student Lives With:** *Mother* | *Father* | *2 Parents* | *Guardian*

List any physical, emotional or allergy concerns: _____

Mother's Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Cell Phone: _____ **Work Phone:** _____

Father's Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Cell Phone: _____ **Work Phone:** _____

Preferred Email Address: _____

Church Child Attends: _____

Last School Attended (if any): _____

I understand that by submitting this application, I am responsible for paying the tuition. I also understand that if I do not pay the tuition, my child will not be allowed to attend class until tuition payments are current.

(Parent / Guardian Signature)

(Date)