



East Glenville Christian Preschool

335 Saratoga Road, Glenville, NY 12302-5093

Phone: (518) 280-7865

e-mail: preschool@egcchurch.org

January 2024

Dear Parents:

Please find attached the application for East Glenville Preschool. East Glenville Preschool was established in 1962 as a non-profit, non-denominational school. To register your child in the 2024-2025 class, please send in a \$35 non-refundable registration fee, payable to East Glenville Preschool, and the application.

The immunization form and the medical form must be filled out and signed by a doctor and returned by the first day of school. The immunization form is not required for returning students unless there is a change. Please make your doctor's appointment early in 2024 so this can be completed before school begins. New York State requires immunization for all school children (including nursery school) to be shown before the child enters school.

The regular monthly tuition rates are as follows (**September and June will be prorated**):

The 2-year-old classes meet Monday and/or Thursday or Tuesday and/or Friday

9:15-10:45 a.m. beginning September 30th

Tuition: \$47 per month for 1-day-a-week

\$94 per month for 2-days-a-week

The 3-year-old classes meet Monday and Tuesday beginning September 16th

9:00-11:30 a.m. Tuition: \$116 monthly

With optional Wednesday beginning September 18th- \$174 monthly

The 4-year-old classes meet Wed., Thurs., and Fri. beginning September 18th

9:00-11:30 a.m. Tuition \$174 monthly

With 4th day optional Tuesday beginning September 24th, Tuition \$232 monthly

The age cut-off date is December 1st unless your school district has a different date.

Preschool holidays and vacations will coincide with the Burnt Hills-Ballston Lake School District; however, regular classes will end in mid-June.

You will receive a letter in August regarding the beginning of school.

If you need further information, or if you would like to visit the school, please contact the preschool at 518-280-7865 or preschool@egcchurch.org.



Application
For the *East Glenville Preschool*
East Glenville Community Church

Child's Name _____ Sex _____

Address _____
Street City or Town Zip Code

Telephone _____ Birth date _____

Parent/Guardian Information

	Mother/Guardian	Father/Guardian
Name	_____	_____

Address	_____	_____
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Cell Phone	_____	_____
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Email address	_____	_____
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Where you work	_____	_____
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Siblings (names and ages) _____

Church Attending _____

Outstanding Interests of Child _____

Comments (such as one-parent family, new baby, recent deaths, etc.) which may affect the child _____

Select the class(es) you are registering your child for

2-Year-Old 9:15 – 10:45 select one or both days in either M/Th or T/F session

Monday _____ Thursday _____

Tuesday _____ Friday _____

3-Year-Old (Monday and Tuesday 9:00-11:30) _____

Optional Wed Enhanced (9:00-11:30) _____

4-Year-Old (Wednesday, Thursday, and Friday 9:00-11:30) _____

Optional Tues Enhanced (9:00-11:30) _____