



Calvary Early Learning Center  
4725 Old William Penn Highway  
Murrysville, PA 15668-2012  
724-327-2898

January 2024

Dear Parents or Guardians:

It's that time of year again when we begin our enrollment for the 2024-2025 school year. We will open enrollment to the community soon, but before we do that, we want to give our current families the first opportunity to claim a spot in the class you want for your child. Remember that a 10-student limit is wonderful for student/teacher ratio, but it can also fill up quickly.

Please spend a few minutes looking over the pdfs in the email you received. If you need to fill anything out, you may type them directly on the fillable pdfs. Remember to save each form before going on to the next one. If your signature is required, you may include a jpeg of your signature. When all of the forms are complete you have two options.

1. You may print out your forms at home, include your signature as needed, and return them to the school office with your \$75 registration fee. Your child will be registered that day.
2. You may attach the completed documents and email the forms to [director@calvarylems.org](mailto:director@calvarylems.org). I will print them at school, but your child's registration will not be complete until you send in the \$75 registration fee.

- An Application for Enrollment,
- An Emergency Form,
- A Tuition Rate List,
- A School Calendar,
- An Immunization Form,
- A Tuition Policy and Parent Agreement of Support Form (2 copies),
- A Consent, Waiver, and Release of Liability Form,
- Information on Clearances, and
- A Curriculum overview of the class including a basic daily schedule.

If you are planning to re-enroll your child for 2024-2025, please complete the accompanying forms and return them at your earliest convenience with a \$75 Registration Fee to secure your child's spot in the class.

We will open Registration to the community on **Monday, February 5, 2024**.

We thank you for blessing us with your child at Calvary Early Learning Center. If you have any questions, please don't hesitate to contact me at 724-327-2898 or at [director@calvarylcms.org](mailto:director@calvarylcms.org).

In His Service,

A handwritten signature in cursive script that reads "Laura R. Hoff".

Laura R. Hoff  
Administrator

Enclosures

**NOTICE OF NONDISCRIMINATION**

Calvary Early Learning Center admits students of any race, color, national or ethnic origin, or religious affiliation, to all rights, privileges, programs and activities available to students at the school. It does not discriminate on the basis of gender, race, creed, color, or national or ethnic origin in administration of its education policies, scholarship, or other school-administered programs.

Date Received:

Reg. Fee Check #



# Calvary Early Learning Center

## Application for Enrollment 2024-2025

### STUDENT INFORMATION

Name (Last, First, Middle):

Age: Sex: Male  Female  Birthday:

Address:

City

State

Zip Code

Home Phone:

Email:

Marital Status of Parents: Married  Living Together  Separated  Divorced  Grandparent

Custody/visiting arrangement, if applicable:

School Last Attended:

### FAMILY INFORMATION

Father's Name:

Occupation:

Employer:

Business Phone:

Father's Cell Phone:  
Accepts Texts? Y N

Mother's Name:

Occupation:

Employer:

Business Phone:

Mother's Cell Phone:  
Accepts Texts? Y N

Name and Ages of Siblings:

### ENROLLMENT INFORMATION

*Please check the Program for which you are registering:*

Two Year-Old Program		Three Year-Old Program		Four Year-Old Program	
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Pre-Kindergarten	
------------------	--

Kindergarten (M-F)	Kindergarten Only: Will you require busing?	No	Yes:	a.m.		p.m.	
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Name of Home School District:

Continue on back

**ADDITIONAL INFORMATION**

Does your child attend church?    Yes     No

If yes, where? \_\_\_\_\_

Name of Pastor: \_\_\_\_\_    Has your child been baptized?    Yes     No

Does your child have an emotional problem or have difficulty learning new things?    Yes     No

If yes, please explain: \_\_\_\_\_

Does your child have a medical condition or allergy?    Yes     No

If yes, please attach medical documentation from child's physician and explain below:

How did you hear about CELC? \_\_\_\_\_

**PERMISSION FORM**

I give my permission to have my child photographed and/or videotaped for the purpose of positive public relations for Calvary Early Learning Center.    Yes     No

I give my permission for my child's photo to be used on the Calvary Early Learning Center website. Names of the students will not be published and student identification will not be revealed. The photos chosen for inclusion on the Homepage will be used to illustrate the positive Christian environment promoted at Calvary Early Learning Center.    Yes     No

May we include your child's name, your name, address, home phone number, cell phone number, and email address in a student directory for the school year? This information may be used for purposes of communication, party invitations, or special announcements.    Yes     No

May we use this email address to contact you regarding school-related issues?    Yes     No

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

**\$75.00 Registration/Materials Fee (non-refundable) is due at time of application.**

**Please enclose a check payable to:**

**Calvary Early Learning Center**

*4725 Old William Penn Highway*

*Murrysville, PA 15668-2012*

*(724) 327-2898*



# Emergency Information 2024-2025

Child's Name	Date of Birth			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">Last</td> <td style="width: 33%; text-align: center;">First</td> <td style="width: 33%; text-align: center;">Nickname</td> </tr> </table>	Last	First	Nickname	Home Phone
Last	First	Nickname		
Street Address				
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">City</td> <td style="width: 33%; text-align: center;">State</td> <td style="width: 33%; text-align: center;">Zip code</td> </tr> </table>	City	State	Zip code	
City	State	Zip code		
Mother or Guardian	Cell			
(Include maiden name)				
Employment	Work			
Hours:				
Father or Guardian Name	Cell			
Employment	Work			
Hours:				
Parent/Guardian Email Address				

Persons authorized to pick up child:

---

*No child will be released to anyone not known to the school without authorization from parents or guardian.*

### Person to be called in case of emergency

(Be sure to include someone who will usually know your whereabouts)

Name	Relationship to child			
Address	Phone			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">City</td> <td style="width: 33%; text-align: center;">State</td> <td style="width: 33%; text-align: center;">Zip code</td> </tr> </table>	City	State	Zip code	Cell
City	State	Zip code		
Name	Relationship to child			
Address	Phone			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">City</td> <td style="width: 33%; text-align: center;">State</td> <td style="width: 33%; text-align: center;">Zip code</td> </tr> </table>	City	State	Zip code	Cell
City	State	Zip code		
Child's Physician	Phone			

Emergency Hospital preference \_\_\_\_\_

I authorize the school to give my child Tylenol, if needed  
\_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_



# Calvary Early Learning Center

## 2024-2025 Tuition Rates

### Threes

Monday, Wednesday, Friday 9:00 - 11:30 am

Registration, which includes Materials Fee \$75

Tuition \$220/month\*  
\$1980/year  
\*\*\$1920.60

### Fours

Monday, Wednesday, Friday 9:00 am - 11:30 am

Registration, which includes Materials Fee \$75

Tuition \$220/month\*  
\$1980/year  
\*\*\$1920.60

### Pre-K

Monday -Thursday 12:30 - 3:00 pm

Registration, which includes Materials Fee \$75

Tuition \$260/month\*  
\$2340/year  
\*\*\$2269.80

### Kindergarten

Monday - Friday 9:00 am - 2:00 pm

Registration, which includes Materials Fee \$75

Tuition \$360/month\*  
\$3240/year  
\*\*\$3142.80

Because our class-sizes are small, the Registration Fee is required to reserve a child's place in a particular class. CELC will purchase materials for that child's education, so the Registration Fee is non-refundable.

*\*Monthly tuition payments are paid from September 1 to May 1*

*\*\*reflects 3% discount if total tuition is paid in full by Thursday, August 15, 2024.*

### Two Year Old Class

\$20 per class; no registration fee.

Tuesday & Thursday: 9:00 am - 11:00 am

This is a pay-as-you-go program. Your child can attend Tuesdays only, Thursdays only, or both.

Pre-buy vouchers and present one at the beginning of the class your child is attending.

You do not pay for classes your child does not attend.

Class-size is limited to 10 students. Sign-up a week in advance is required.

**August**

Su	M	Tu	W	Th	F	Sa
18	19	20	21	22	23	24
25	26	27	28	29	30	31

21: First Day of School for K  
21-23: Early Dismissal; 11:30 a.m.  
29: Preschool Orientation

**September**

Su	M	Tu	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

2: Labor Day; No School  
3: 1st Day for 2's, 3's, and PreK  
4: 1st Day for 4's  
12: Hoagies  
19: School Board Meeting  
School Pictures TBA

**October**

Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

10: Hoagies  
14: Columbus Day; No School  
17: School Board Meeting  
24: Harvest Party: 2's, 3's, and PreK  
25: Harvest Party for 4's and K  
25: First Quarter Ends (46 days)

**November**

Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

14: Hoagies  
15: School Board Meeting  
27: No School  
28: Thanksgiving; No School  
29: Thanksgiving Break, No School

**December**

Su	M	Tu	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

2: Thanksgiving Break, No School  
7: Breakfast with Santa  
13: Christmas Program; 10 am  
19: Christmas Party: 2's and 3's  
20: Christmas Party: 4's, PreK, and K  
20: Early Dismissal for K  
23 - Jan. 3: Christmas Break;

**January**

Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

1-3: No School  
6: School Resumes  
17: Second Quarter Ends (46 Days)  
16: School Board Meeting  
20: MLK, Jr. Day; No School  
27-31: Lutheran Schools Week

**February**

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

13: Valentine's Day Parties: 2s, 3s, PreKs  
14: Valentine's Day Parties: 4's and K  
17: Presidents' Day; No School  
21: School Board Meeting

**March**

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

5: Ash Wednesday  
9: Daylight Savings Begins  
20: School Board Meeting  
28: 3rd Quarter Ends (48 Days)

**April**

Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

4: Spring Program  
15: Easter Parties; 2s and 3s  
16: Easter Parties; 4s, PreK, and K  
17: Maundy Thursday; No School  
18: Good Friday; No School  
20: Easter Sunday  
21: Easter Monday; No School

**May**

Su	M	Tu	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

21: Preschool Graduation Lunch  
22: School Board  
26: Memorial Day  
30: Last Day for K (41 Days)  
30: K Graduation; 11:00 a.m.  
K Early Dismissal 11:30 a.m.



# Calvary Early Learning Center

## Immunization Form

Due: October 1, 2024

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Parent or guardian \_\_\_\_\_

Telephone \_\_\_\_\_

Race/ethnicity:  White  Black  Asian or Pacific Islander  American Indian or Alaskan Native

Hispanic origin:  Yes  No

Please circle present class: Twos Threes Fours PreK K

### PENNSYLVANIA DEPARTMENT OF HEALTH – CERTIFICATE OF IMMUNIZATION

VACCINE Circle appropriate item	Enter month, day, and year when immunization doses listed below were given.				
Diphtheria, tetanus and acellular pertussis (DTaP, DTP, Td or DT)	1 / /	2 / /	3 / /	4 / /	5 / /
Tetanus, diphtheria and acellular pertussis (Tdap)	1 / /	2 / /	3 / /	4 / /	5 / /
Polio (OPV or IPV)	1 / /	2 / /	3 / /	4 / /	5 / /
Hepatitis B	1 / /	2 / /	3 / /	4 / /	5 / /
Measles - mumps - rubella (MMR)	1 / /	2 / /	or Measles serology Date Titer		
Varicella (vaccine or disease)	1 / /	2 / /	Rubella serology Date Titer		
Meningococcal (MCV)	1 / /	2 / /			
Other	1 / /	2 / /	Mumps disease diagnosed by a physician: Date		

H502.320 Rev. 03/17

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Parent or guardian \_\_\_\_\_

Telephone \_\_\_\_\_

Please circle present class: Twos Threes Fours PreK K

### STATEMENT OF EXEMPTION TO IMMUNIZATION LAW

#### MEDICAL EXEMPTION

The physical condition of the above-named child is such that immunization would endanger life or health.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(PHYSICIAN)

#### RELIGIOUS EXEMPTION

State your reason for requesting this exemption.

#### PHILOSOPHICAL/STRONG MORAL OR ETHICAL CONVICTION EXEMPTION

State your reason for requesting this exemption.

Signed \_\_\_\_\_  
(PARENT OR GUARDIAN) (Date)





**Calvary Early Learning Center**  
 4725 Old William Penn Highway  
 Murrysville, PA 15668  
 724-327-2898

## TUITION POLICY AND PARENTS' AGREEMENT OF SUPPORT

The undersigned parents agree to pay a total of \$\_\_\_\_\_ for the 2024-2025 school year in Nine (9) equal monthly payments beginning on or before the close of business on **September 1<sup>st</sup>**.

- Tuition payments are **due on or before close of business on the 1st calendar day of each month**. Tuition is paid on a **9-month schedule from September through May**, with payments beginning the month the school year starts and ending 1 month before the school year ends.
- Checks are to be made payable to **Calvary Early Learning Center** and dropped off in the school office or mailed directly to CELC; 4725 Old William Penn Highway, Murrysville, PA 15668.
- Checks returned for insufficient funds will be assessed a penalty of \$15, in addition to any fees imposed by the issuing bank.
- **A \$10 late fee will be assessed for any payment received after close of business on the 5<sup>th</sup> calendar day of the month. Late fees will accumulate monthly at \$10 each month until payment is received.**
- Children will not be able to attend class if a tuition payment is not made by the 10<sup>th</sup> calendar day of the month until the past due amount (including the \$10 penalty) has been paid.
- Parents receive a 3% discount on the cost of tuition if the total year's tuition is paid in full by the 15<sup>th</sup> calendar day of August.
- Staff members will receive a 20% discount on the cost of tuition for their child(ren) to attend school.
- Any child from a clergyman's family will receive a 20% discount on the cost of tuition.\*
- **Families with more than one child attending the school will receive a 10% discount on the tuition cost for the second (third or fourth) child.\***
- \*Only one discount can be applied per child. (Either the clergy discount or the additional child; not both.)
- **Parents are encouraged to make every effort to pay tuition on time.** For circumstances requiring special consideration, parents can speak with the Administrator in confidence. The Administrator will make every reasonable effort to reach an agreement that is in the best interest of all concerned parties.

**Our signature indicates that we have read, understand, and agree to the terms as stated above in the Tuition Policy.**

\_\_\_\_\_  
 Parent's signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed name

\_\_\_\_\_  
 Parent's signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed name

**PARENTS ARE TO SIGN 2 COPIES – 1 FOR THE SCHOOL & 1 FOR THEIR RECORDS**



**Calvary Early Learning Center**  
 4725 Old William Penn Highway  
 Murrysville, PA 15668  
 724-327-2898

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\_\_\_\_\_  
 Parent's signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed name

\_\_\_\_\_  
 Parent's signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed name

**PARENTS ARE TO SIGN 2 COPIES – 1 FOR THE SCHOOL & 1 FOR THEIR RECORDS**



**Calvary Early Learning Center**  
**Consent, Waiver and Release of Liability Form 2024-2025**

I, \_\_\_\_\_, hereby certify that I am the Parent  
or Legal Guardian of the minor child: \_\_\_\_\_

I hereby consent for my child to attend Calvary Early Learning Center and participate in all activities sponsored by Calvary Early Learning Center. I have inspected the premises and consulted with Calvary Early Learning Center employees, including teachers and instructors. I have determined that the premises are safe and I consent to leave my child in the care and custody of Calvary Early Learning Center. I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the school. I hereby grant permission for my child to leave the school premises under the supervision of a staff member for neighborhood walks or for field trips in an authorized vehicle. I hereby grant permission for my child to be included in evaluations connected with the school program.

I represent that my child is properly immunized against all childhood diseases or illnesses. I represent that I have advised Calvary Early Learning Center staff regarding any allergies or physical disabilities that my child may have. I agree to indemnify and hold Calvary Early Learning Center, its directors, employees, and agents harmless against any and all claims arising from injury or illness my child may suffer as the result of food allergies or disabilities that I previously disclosed to Calvary Early Learning Center, or food allergies or disabilities that I had knowledge of but did not disclose.

I represent that my child has health insurance coverage and I agree that I will maintain said coverage during the entire time my child attends or participates at Calvary Early Learning Center. I have been advised that Calvary Early Learning Center does not provide health insurance or medical coverage to my child, in any form, under any circumstances.

I agree to indemnify and hold Calvary Early Learning Center its directors, employees and agents harmless against any and all claims arising as a result of my child attending and/or participating in the activities of Calvary Early Learning Center.

I authorize Calvary Early Learning Center and its directors, employees and agents to provide first aid care, or emergency medical care to my child and/or to obtain such emergency medical care for my child as may appear reasonably necessary in my absence, including emergency transportation to a hospital. I agree to be financially responsible for any and all medical expenses or costs that are incurred in treating my child for illness or injury when said illness or injury arises as while my child is on the premises of or in the custody of Calvary Early Learning Center.

I CERTIFY THAT I HAVE READ THE ABOVE AGREEMENT AND AGREE TO THE TERMS THEREOF.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date



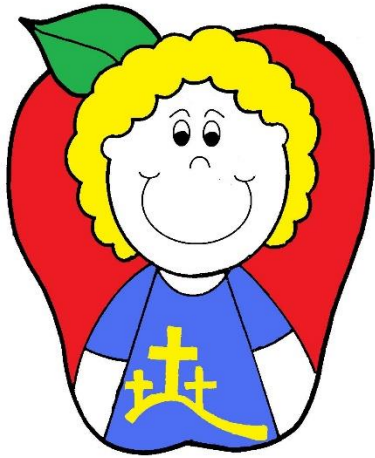
## CLEARANCES

Our staff and school board members have their clearances on file. In accordance with the law, if you would like to volunteer as a Homeroom Mom/Dad or with any of our classroom parties, we need you to provide copies of the following Clearances:

**CY 113 - Pennsylvania Child Abuse History Clearance**

**SP 4-164 - Request for Criminal Record Check**

Thank you for your cooperation. These forms are available online at the PA Child Welfare Portal or at, <http://keepkidssafe.pa.gov/resources/clearances/index.htm>. You may request copies in the school office.



Calvary Early  
Learning Center  
has a class just for  
Two Year Olds.

4725 Old William Penn Highway  
Murrysville, PA 15668  
724 327-2898

**Do you want to give your toddler an introduction to school? Check out CELC's Two's class.**

**You will find:**

- a loving and safe Christian environment. Bible lessons and songs are part of each class.
- opportunities for socialization; free play with other children. Learning to share and how to take turns are daily lessons.
- introduction to alphabet, numbers, colors, and shapes.
- art activities that are appropriate for small hands and fine motor-skills.
- classes that are held from 9:00-11:00 a.m. only Tuesdays, only Thursdays, or both. Your choice!
- no registration fee. Pay only for the classes your toddler attends.
- a teacher and aide per 10 students (class limit)
- a few hours to yourself.

## **What is CELC's Two's Class all about?**

CELC wants each child to know that he/she is special and wonderfully created by God.

Our objectives for the Twos are to begin building the foundation for a lifelong love of learning through play and a variety of planned activities. We will also work to build social and emotional skills, including developing relationships with other children and adults.

The children begin learning to listen to others, to follow directions, and to express themselves appropriately. They are introduced to letters, numbers, shapes, art, and reading.

Parents choose whether their child will attend **Tuesdays only, Thursdays only, or both Tuesdays and Thursdays.** Because this class is *pay-as-you-go*, it is essential that parents sign up a week in advance, so our teacher knows how many students to prepare for. If parents do not sign up for the next week's class, they run the risk of the class being full.

Each class is \$20. Parents purchase vouchers in the church/school office as needed and gives one voucher to the classroom teacher when they drop off their child.

Parents purchase the vouchers and sign-up for the next week in the school office. If a child is not able to attend a particular day, there is no payment, but parents should call the office to let us know he/she is not coming. Another parent may want that spot for their child.



# Calvary Early Learning Center

## Registration for 2024-2025 Starting Soon

January 19, 2024

Dear CELC Families,

**We have advertised Calvary Early Learning Center as *The best kept secret in Murrysville*. We don't want to keep it a secret any longer, and we need your help.**

- Registration opens to you, our current families next week during Lutheran Schools Week, so that you have first chance at reserving a spot for your child's next class. You know that our \$75 Registration Fee is nonrefundable. **However, if you register your child before Easter Sunday, March 31, 2024, we will deduct the \$75 off of your August full-tuition payment or your September tuition payment.**

**We have long believed that our best advertisement is *word of mouth* from those who know us best, and this year, we are going to reward you for sharing our secret.**

- When a new family enrolls a child in either the Fours, PreK, or Kindergarten class because of your recommendation, we will **deduct 20%** off of your monthly tuition for each month the referred child attends CELC.
- If you tell **two** new families about CELC, and they both enroll a child in either the Fours, PreK, or Kindergarten class because of your recommendation, we will **deduct 40%** off of your monthly tuition for each month the referred child attends CELC, and so on.
- **If your recommendations bring five new families to our 4s, PreK, or K classes, your tuition will be FREE!**

### *How will this work?*

There is a new question on the second page of our Application Form:

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How did you hear about CELC?

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**The parent filling out the Enrollment Application needs to name you.** Each time a new child is enrolled in one of the classes listed above and answers this question with your name, we will mark your account. As long as the child(ren) remain enrolled during the 2024-2025 school year, you will receive a monthly tuition deduction of **20% X the number of referrals.**

If you have questions, feel free to contact Laura Hoff.  
This referral program is for the 2024-2025 school year.