



# School Year 2025 Application

## Student Information

Student's Name: \_\_\_\_\_ Student's Date of Birth: \_\_\_\_\_

Nickname/Preferred name: \_\_\_\_\_ Gender: M F

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

State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Attended Preschool before? No Yes (name of school): \_\_\_\_\_

How did you find out about Good Shepherd (GSLS)? \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Preferred Hospital: \_\_\_\_\_

Please list any allergies or medical conditions:

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Please list any medications your child is currently taking:

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**\*\*GSLS staff will NOT administer any medication except for EpiPens. We do require a Doctor's note if your child needs an EpiPen on campus.**

Language(s) spoken at home: \_\_\_\_\_

***\*Your child's original birth certificate or passport must be submitted, if not already on file from a previous year, prior to the first day of school.***

***\*A completed Virginia School Entrance Health Form MCH 213.G, MUST be signed by a physician within 90 days of the first day of school for all new AND returning students.***

## Parent/Guardian Information

Parent Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Parent Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_ Employer: \_\_\_\_\_

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

**Both parents/guardians listed above are authorized to pick up child from school?**

Yes

No (Please Explain): \_\_\_\_\_

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**Emergency Contacts** (each student must have at least two) The following are also allowed to pick up my child.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

## Class Offerings and Rates

I would like to enroll my child in the following program(s):

- Before Care, 7:30AM-9AM (All ages)**
  - 3 days: \$150/month
  - 5 days: \$250/month
- Ducklings (Preschool, age 2 ½ and non-potty trained\*\* students)**
  - 3 half days (9AM-1PM): \$450/month
  - 3 standard days (9AM-3PM): \$650/month
  - 5 half days: \$625/month
  - 5 standard days: \$975/month
  - Non-potty trained fee\*\*:
    - 3 days: \$30/month
    - 5 days: \$40/month
- Rabbits (Early PreK, age 3)**
  - 3 half days (9AM-1PM): \$450/month
  - 3 standard days (9AM-3PM): \$650/month
  - 5 half days: \$625/month
  - 5 standard days: \$975/month
- Dinosaurs (PreK, ages 4-5)**
  - 5 half days (9AM-1PM): \$625/month
  - 5 standard days (9AM-3PM): \$975/month
- Aftercare, 3PM-5PM (All ages)**
  - 3 days: \$180/month
  - 5 days: \$285/month
- Late Aftercare, 5PM-6PM (All ages)**
  - 3 days: \$100/month
  - 5 days: \$200/month
- Drop-in Rates**
  - Before Care: \$15
  - Half Day: \$40
  - Standard Day: \$60
  - Aftercare: \$20
  - Late Aftercare: \$15

Additional fees:

- Registration Fee (non-refundable): \$100
- Curriculum Fee (non-refundable): \$75 (3 days) / \$100 (5 days)

*\*\*Non-potty trained students are defined as children who wear diapers/pull-ups, have multiple accidents per week, or are unable to use the bathroom without minimal help from an adult. Once a child has met all these requirements, the non-potty trained fee will be removed the following month.*

## Payment Agreement

Payments can be made in cash, check (payable to Good Shepherd Lutheran School), or Zelle (with a 1% additional processing fee).

-Upon acceptance of my application, I will need to pay the \$100 registration fee, appropriate curriculum fee, and my August/June tuition payment (equal to 50% of my regular tuition payment). (please initial):\_\_\_\_\_

-I understand that I will need to review and agree to policies outlined in the 2025 Parent Handbook. (please initial):\_\_\_\_\_

-I understand that tuition must be paid each month by the first of the month. If I do not pay tuition by the 10th of the month, I will be charged a late fee of \$35. (please initial):\_\_\_\_\_

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## Photo Release

GSLS may post pictures or videos of my child on paper/digital media, including social media, and the GSLS website:

- Yes (please initial)\_\_\_\_\_
- No (please initial)\_\_\_\_\_

I understand and agree that I am applying to enroll my child at Good Shepherd Lutheran School for the 2025 School Year.

Parent/Guardian Signature:\_\_\_\_\_ Date:\_\_\_\_\_

Good Shepherd Lutheran School  
Sarah Brazell, Director  
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