



Capitol Hill Learning Group

2012-2013 Preschool Application for New Families
www.capitolhilllearninggroup.com



Date:	Child's name:		
Sex: M ___ F ___	Birth date: (MM/DD/YYYY) PLEASE DOUBLE CHECK THE YEAR!		
Home address (include city/state/zip):			
Parent/Guardian Name 1:		Parent/Guardian Name 2:	
Phone #s: Home _____ Cell _____		Phone #s: Home _____ Cell _____	
*E-mail address:		*E-mail address:	

*Please print clearly and include contact information for both parents/guardians when possible. **Please highlight the e-mail you would like us to use as the primary e-mail contact.** We use e-mail for all correspondence, so please inform us via the "contact" tab on the CHLG web-site if your e-mail address changes.

Please check here if **a)** your child has any special learning needs (or other special needs), **b)** your child is receiving special services (Speech, OT, PT, etc.) or **c)** it has been recommended that you pursue developmental or behavioral testing or intervention for your child. *Please include detailed information regarding your child's situation on the reverse side, as this will help us assess our ability to meet your child's needs.*

Please choose the class(es) for which you are making application (see Class Calculator online for eligibility).

Grasshoppers/Crickets/Junebugs	3 day program	T, TH, F (9-12:45)	10 monthly payments of \$320
*Caterpillars	2 day program	T, TH (9-12:45)	10 monthly payments of \$225
*Honeybees	1 day program	F (9-12:45)	10 monthly payments of \$160
Rollie Pollies	1 day playgroup	W (9-11:00)	\$350/year
Doodlebugs	1 day playgroup	W (9-11:00)	\$350/year

Note that some children may be eligible for more than one option (see the class calculator online to determine eligibility). You may check more than one box to apply for multiple classes OR use numbers to designate your first and second choice.

* I have applied for Caterpillars and/or Honeybees, but my child's birthdate falls in March, April or May of 2010. I understand that, due to licensing requirements, children are not allowed to attend the teacher led classes until they are at least 30 months old. If my child is accepted I am willing to begin paying tuition in September, even though my child will not be allowed to attend class until he/she is 30 months old. Additionally, I understand that I will still be responsible for completing all required duty days just as if my child had started school on September 4th.

PLEASE CHOOSE ONE OF THE APPLICATION OPTIONS BELOW

EARLY ACCEPTANCE (applications are due by 2/27 and must be accompanied by a deposit): Apply for "early acceptance" if CHLG is your first choice (ie: you are not waiting for lottery results from DCPS or other private or charter schools). Include a **non-refundable** deposit (made payable to CHLG) equal to two months of tuition payments (which will cover tuition for May and June of 2013) and a signed copy of the CHLG Membership Agreement, which can be found online under the "apply" tab. *Note: If we have more early acceptance applicants than available space we will have an "early acceptance" lottery. Those who are not chosen in this lottery will have their deposits returned and will be placed on the waitlist ahead of general lottery applicants. Early acceptance applicants will be informed of acceptance or waitlist status by 3/2/2012.

GENERAL LOTTERY (applications are due by 3/15, and a \$25 application fee made payable to CHLG should be included): General lottery applicants will be informed of acceptance or waitlist status no later than 4/15/2012. Please note that if you are chosen in the general lottery, a non-refundable deposit of two month's tuition and a signed copy of the CHLG Membership Agreement (which can be found online under the "apply" tab) will be required in order for CHLG to hold a spot for your child.

By signing this application I affirm that the information given is accurate to the best of my knowledge. I also understand that this application (and non-refundable fee or deposit) do not guarantee my child a spot at CHLG.

Parent signature: _____ Date: _____

Please include either a \$25 non-refundable application fee OR a non-refundable two month deposit made payable to CHLG.

**Mail/drop applications and fee/deposit to CHLG's Membership Coordinator:
Carrie Russell 629 7th Street NE Washington, DC 20002**

FOR CHLG USE:	
Date application received: _____	Application fee received? Y N
Date deposit received: _____	Amount \$ _____