



St. Mark Lutheran Preschool Statement of Condition for Admission

St. Mark Lutheran Preschool and Childcare
1821 North 90th
Omaha, NE 68114

Parents Name: _____

Address: _____

City: _____

State: _____ Zip _____

By signing my name to this document, I acknowledge that I am the parent or legal guardian of (child's name) _____ for whom I have requested admission to St. Mark Lutheran Preschool and Childcare for the 2025-26 school year.

I agree to pay the tuition charges and fees established by St. Mark Lutheran Preschool and Childcare for the current year as follows:

Select	Class	Days	Time	Cost
	3-year-old	T/TH	8:30AM-11:30AM	\$155/month
	4-year-old	M/W/F	8:30AM-11:30AM	\$220/month
	Pre-K 5	M/T/W/TH/F	8:30AM-11:30AM	\$300/month

All classes require a \$80 non-refundable registration fee due at the time of registration.

Tuition is due by the 1st of the previous month (August-April). The first month's payment is due August 1st and last month by April 1st. We encourage families to use our online payment method. A \$25.00 charge will be assessed for insufficient fund checks and cash/money orders will be required for all future payments. A \$5 per day late fee will be enforced for any payments made after the 1st of the month. If tuition is not paid by the end of the month, then your child's place in preschool could be terminated. Tuition is the same each month regardless of holidays or absences.

Children should not arrive at school before 8:25 am. Children must be picked up at 11:30 am daily. A late fee of \$2 per minute will be assessed for children picked up after 11:40 am. Please call the school if an emergency arises that keeps you from picking up your child at 11:30 am.

A 5% discount will be given if tuition is pre-paid for two or more months. Prepaid tuition is non-refundable.

Parent Acknowledgement

In the event that I fail to make the above tuition and fee payments as I agree, I acknowledge that St. Mark Lutheran Preschool and Childcare may permanently terminate the attendance of my child.

Signature of Parent/Guardian: _____ Date: _____