

GOOD SHEPHERD DAY SCHOOL
544 SAYRE AVENUE, LEXINGTON, KY 40508
s: (859) 255-9734 • f: (859) 977-3844

APPLICATION FOR ADMISSION

I hereby submit application for admittance of my child _____ in the following class(es) for the 20 21 - 20 22 school year. Birthday ___/___/___ Gender: M / F

A non-refundable application fee of \$150.00 per child will be due prior to the start of the school year.

PRESCHOOL AM CLASSES (8:30 am – 11:30 am)

2-Year-Old Class (20+ mo.)

___ **2 DAYS** – Tuesday, Thursday
___ **3 DAYS** – Monday, Wednesday, Friday
___ **5 DAYS** – Monday - Friday

3-Year-Old Class

___ **2 DAYS** – Tuesday, Thursday
___ **3 DAYS** – Monday, Wednesday, Friday
___ **5 DAYS** – Monday - Friday

4-Year-Old Class

___ **4 DAYS** – Monday - Thursday
___ **5 DAYS** – Monday - Friday

EXTENDED DAY CLASSES (for 2, 3 and 4 Year Olds)

___ **Dawn Patrol** 7:30 am – 8:30 am (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Lunch Bunch** 11:30 am – 1:00 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Dream Team** 11:30 am – 3:30 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Sunshine Kids** 11:30 am – 4:30 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Discovery Crew** 11:30 am – 5:30 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)

KINDERGARTEN

___ Monday – Friday, 8:30 am – 2:30 pm

EXTENDED DAY CLASSES (for Kindergarten)

___ **Dawn Patrol** 7:30 am – 8:30 am (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Option #1** 2:30 pm – 3:30 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Option #2** 2:30 pm – 4:30 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)
___ **Option #3** 2:30 pm – 5:30 pm (circle preferred days: Monday | Tuesday | Wednesday | Thursday | Friday)

Print Parents' Name(s) _____

Mailing Address _____ Zip Code _____

Email Address _____

Home Phone _____ Cell Phone _____

Signature _____

Member of Good Shepherd Church? ___ Yes ___ No

GSDS Admin.: _____

Date received: _____

app fee enrolled wait list