1401 Carroll	ton Avenue * To	wson, Marylan	d 21204 * 410)-825-7139 * God	odShepherdRuxton.org		
CHILD'S NAME:			Preferred Name:				
Gender M/F:	Birth Date:						
Applications are recorded 1st after current student non-refundable deposit v	s are placed in t	heir appropriat	e programs. T	To accept placen	•	-	
*Priority is given to but i	-		-)			
Little Lambs (12-18 months by Sept. 1)*Busy Bears (18-23 months by Sept. 1)*BB/J2s (2 between Sept. 1 & Dec. 31) Per the <i>current</i> MSDE requirements, any adults accompanying children in our adult/toddler programs must provide a copy of their COVID-19 vaccination verification prior to the start of school. This requirement only applies to these adult/toddler programs.				2-Day 2s T/TH (2 by Sept. 1)3-Day 2s M/W/F (2 by Sept. 1)3-Day 3s M/W/F (3 by Sept. 1)5-Day 3s (3 by Sept. 1)Pre-K (4 by Sept. 1)Extended Pre-K (4 by Sept. 1)Kindergarten (5 by Sept. 1)			
PARENT/GUARDIAN (1) N	NAME:						
HOME ADDRESS:							
(City)	(State)	(Zip code)	_ Phone h:		c:		
EMAIL ADDRESS:							
PARENT/GUARDIAN (2)	NAME:						
(City)	(State)	(Zip code)	Phone h:		c:		

How did you hear ab	out us?				
Prior preschool or pr	ogram attended:				
Has the applicant co	nsulted with a ph	ysician or other pro	ofessional regard	ding physical, emotiona	l or academic
If yes, please provide	additional inform	nation:			
	with the school o	or have been partici	pating members	nal origin. Priority is give s of The Church of the Go sis.	
Tuition is paid throug The following tuition		•	ay be paid in ful	ll, by semester or month	ly.
Little Lambs: Busy Bears: BB/J2s:		2-Day 2s: 3-Day 2s: 3-Day 3s: 5-Day 3s:	\$4,195 \$4,390	Pre-K: Extended Pre-K: Kindergarten:	• •
of \$30 that is non-ref be processed through there is room for my	fundable and not h the current FAC child in the appro	applicable to tuition TS account.) Placem opriate class and I ch	n. (For Sibling Ap nent letters are e noose to accept	or. I have enclosed an appopulations, the \$30 appopulations appopulation of the state of the spot, I will complete cable to tuition, is \$300 for the spot, I will complete cable to tuition, is \$300 for the spot, I will complete cable to tuition, is \$300 for the spot of t	lication fee will In the event a Registration
Signature of Parent/	Guardian		Date		
Please mail Application The Good Shepherd S 1401 Carrollton Aven Towson, Maryland 23 Or place in our locked	School nue 1204		Good Shepherd	l School) to:	
			F	or Office Use Only: Date:	

Check/Cash received: \$_____ Check #____

FACTS: _____