

2026/2027
Registration Packet



Registration begins now!

To register you will need the following:

1. Completed Registration Application for 2026/2027 School Year
2. Completed ADHS Emergency Information Card
3. Updated Immunization Record from your child's physician
4. **Registration Fee - \$250.00** (per student)
**This non-refundable Registration Fee will be charged each year your child is enrolled.
5. **Materials Fee - \$150.00** (per student)
**This non-refundable Materials Fee will be charged each year your child is enrolled.

Registration Process:

- Registration paperwork and fees (listed above) may be submitted as early as November for the following school year, which begins in August.
- Pre-registration applications prior to February 1, 2026 must be turned in at the school office in-person with all payments paid upfront.
- Upon receipt of ALL the necessary paperwork (listed above) and fees, applications will be numbered indicating the order in which the application was received.
- ***The first month's tuition, for August 2026, is due June 1, 2026***, to hold your child's enrollment spot. All future months' tuition will be due on the first day of the month prior to the month the tuition payment is allocated to (ex. September tuition will be paid on August 1, October tuition will be paid on September 1, etc.).

Registration Timeline:

November 6, 2025	26/27 school year registration period begins – ALL students may apply!
January 30, 2026	Final Day of priority application enrollment – current and previous families
February 2-6, 2026	Enrollment confirmation emails will be sent to priority applicants
February 3, 2026	Open enrollment placement begins
February 2-6, 2026	Enrollment confirmations sent to open enrollment applicants

For ALL registration and enrollment related inquiries, please email:

registration@newcovenantaz.org

Schedule Selections will be locked in unless otherwise discussed.

If there is a need for a schedule change it must be done prior to January 15, 2026.



2026/2027 School Year Fees

New Covenant offers half-day and full-day preschool and full-day kindergarten through first grade options for children between the ages of 2-6 years old. We are open from 7am to 6pm, allowing for drop-in and contract-based extended care. The schedule flexibility is endless, the love and attention that we provide is unparalleled, and the first educational experience for you and your family is irreplaceable.

Registration / Commitment Fees

	Amount	Due Date	Terms
Registration Fee	\$250	With Application	Non-refundable
Materials Fee	\$150	With Application	Non-refundable
August Tuition	Total Monthly tuition cost	June 1, 2026	Non-refundable

Monthly Program Tuition

	2's	3's	4's
2 Half days	\$533	\$515	\$506
3 Half days	\$721	\$696	\$683
4 Half days	\$884	\$866	\$850
5 Half days	\$1063	\$1057	\$1037
2 Full days	\$725	\$713	\$706
3 Full days	\$997	\$991	\$980
4 Full days	\$1244	\$1229	\$1178
5 Full days	\$1386	\$1364	\$1341

	Monthly	Annual
Kindergarten	\$1377	\$13,770
First Grade	\$1480	\$14,800

Daily Drop-in Naptime Fees

	2's	3's	4's
Drop-in Nap (Daily Rate)	\$25	\$20	\$15

Monthly Extended Care Fees

	2 days/week	3 days/week	4 days/week	5 days/week	K/1
Early care (7-8:40 am)	\$90/month	\$125/month	\$160/month	\$190/month	\$100
After care (3 - 6 pm)	\$145/month	\$205/month	\$265/month	\$315/month	\$150
Hourly Drop-in Rate	\$16/hour	\$16/hour	\$16/hour	\$16/hour	\$16/hour

**All accounts will be charged a monthly security assessment fee (\$30/family) in addition to the monthly tuition*

- Flexible schedules are available
- All fees are subject to change
- **Charges to accounts can be added at anytime during the school year**
- Families are responsible for all charges on their account, despite timing or delay in posting charges to the account (i.e. extended care, added days, yearbook purchases, etc.)
- Please contact the office for prices not listed
- Decreases in schedule will not reflect a tuition credit/refund, when occurring after the first of the month.

SCHOOL YEAR CALENDAR

- New Covenant Lutheran School will follow the general annual schedule represented in the Scottsdale Unified School District Calendar for 2026/2027. We will remain open all day unless noted on our school calendar for **our** school-specific designated early release days.
- We are a school and not a daycare center. For this reason, we follow the traditional school year calendar, observing all national holidays, as well as recess for Fall Break, Christmas/Winter Break, and Spring Break.
- The school year begins on August 11, 2026, and commences on May 26, 2027.

KINDERGARTEN

- ✓ Eligible kindergarten students are those who have successfully completed a pre-kindergarten program and will be turning 5 years old before December 31st, 2026.
- ✓ **ALL KINDERGARTEN STUDENTS** are eligible for consideration of scholarship funding through multiple school tuition organizations, such as Arizona Christian School Tuition Organization (ACSTO). We encourage parents to review the attached list of school tuition options and apply. Please contact Tricia, our Financial Manager, at ncschooloffice@newcovenantaz.org with questions and be sure to also inform her when you have applied for the various scholarships.
- ✓ NCLS offers a \$50 tuition credit to families who can provide proof of personal tax dollar redirection to one of the eligible STO's.

MATERIALS FEE - INCLUSIONS WITH ENROLLMENT

- NCLS will host 4 “Parent’s Night Out” events throughout the school year, where NCLS students will enjoy pizza, movies, games, and excitement, while parents take a break. These events will be hosted on the premises for 3 hours. Siblings who are not current students at NCLS may attend for a nominal fee. Dates will be announced at the beginning of the school year.
- Children’s bible or other selected complimentary biblical text will be offered to each child at the beginning of the school year.
- Yearbooks will be provided to all students at the end of the school year.
- Speech and language developmental screenings will be provided to each enrolled student in the initial months of the school year.

STUDENT INFORMATION		
Last Name:	First Name:	Middle Name/Initial:
Sex: ☐ Male ☐ Female	Date of Birth (Month/Day/Year):	
Date of Enrollment:		
ALLERGIES / MEDICATIONS:		
NAP: ☐ Naps at home still ☐ Does not nap ☐ Naps sometimes		
POTTY-TRAINING: ☐ Fully potty-trained ☐ Currently potty-training ☐ Not potty-trained		
By signing below, I acknowledge that my child will not be allowed to attend class without the emergency form and vaccine information or exemption as required by state. _____		

PLEASE PRINT ALL REQUIRED CONTACT INFORMATION CLEARLY.

PARENT/GUARDIAN INFORMATION	
MOTHER (PRIMARY GUARDIAN)	FATHER (SECONDARY GUARDIAN)
Last Name:	Last Name:
First Name:	First Name:
Relation:	Relation:
Address:	Address (if different):
Phone (Mobile):	Phone (Mobile):
Phone Home: Phone Work:	Phone Home: Phone Work:
Email:	Email:
PRIOR SCHOOL(S) & YEAR(S) ATTENDED:	
BRING-A-FRIEND REFERRAL-REFERRED BY:	

♥ REFERRALS ARE THE HIGHEST COMPLIMENT AND GREATLY APPRECIATED! ♥

By signing below, I hereby acknowledge that ALL the above information is true and correct. I will not hold NCLS accountable for mistakes made by me on my registration application. **Please inform the Director of all legal agreements or decrees that state parenting time, decision-making, custody and financial parameters in which we should be aware of. We also ask that you inform us of any and all individuals who MAY NOT pick-up your child.**

Primary Guardian Signature* (required):	Date:
Secondary Guardian Signature* (required):	Date:

SCHEDULE REQUESTS

Primary Schedule Request:

	Early care Drop-off Time	Half Day	Full Day	ADD Naptime	After care Pick-up Time
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Kindergarten			X		

Secondary Schedule Request:

	Early care Drop-off Time	Half Day	Full Day	ADD Naptime	After care Pick-up Time
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Kindergarten			X		

** We will always do our best to meet the requests and needs of each individual family and student. We ask for first and second choice schedule requests for individuals with flexibility. If you have no flexibility with scheduling, please state that in the secondary schedule request grid.*

Sibling Discount Info: Do you have more than one child in your family that will be attending New Covenant this school year? ☐ Yes ☐ No

If yes, please list the names of sibling(s): _____



OPTIONAL CONTRIBUTIONS

OPTIONAL SCHOLARSHIP FUND:

I WOULD LIKE TO MAKE A DONATION TO THE "ROBOT MAN" SCHOLARSHIP FUND FOR PRESCHOOL FAMILIES IN NEED. THIS SCHOLARSHIP IS IN LOVING MEMORY OF MIKE WALTER, A LONGTIME SUPPORTER OF NEW COVENANT LUTHERAN CHURCH AND SCHOOL.

ONE-TIME DONATION	\$10	\$25	\$50	OTHER AMOUNT =	MONTHLY DONATION	\$10	\$25	\$50	OTHER AMOUNT =
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ANY AMOUNT IS GREATLY APPRECIATED TO HELP SUPPORT THE EDUCATIONAL NEEDS OF OUR PRESCHOOLERS! NEW COVENANT LUTHERAN SCHOOL IS A MINISTRY OF NEW COVENANT LUTHERAN CHURCH. WE RELY HEAVILY ON COMMUNITY SUPPORT AND DONATIONS OF TIME AND FINANCIAL RESOURCES.

GENERAL FUND CONTRIBUTIONS:

I WOULD LIKE TO MAKE A **ONE-TIME DONATION** TO THE SCHOOL AND/OR CHURCH IN THE AMOUNT OF:

SCHOOL \$ _____

CHURCH \$ _____

I WOULD LIKE TO MAKE A **MONTHLY PLEDGE** TO THE SCHOOL AND/OR CHURCH IN THE AMOUNT OF:

SCHOOL \$ _____

CHURCH \$ _____

ANY OF THE ABOVE DONATIONS YOU HAVE CHECKED ABOVE WILL BE ADDED TO YOUR ACCOUNT. WE GREATLY APPRECIATE YOUR GENEROUS SUPPORT!

PRINTED NAME: _____

SIGNATURE: _____

DATE: _____



Please completely fill out the attached form:

The ADHS Emergency, Information and Immunization Record Card

This is a **state-regulated form** and without all the information, your child will not be permitted to attend class. Please be sure to **sign and date** the form in the highlighted sections and include **at least 2 non-primary parent/guardian emergency contacts**. Incomplete forms will not be accepted as ADHS requires this form to be on file for each student.

Application Notes (Admin Only):

Child's Name:
Age Group:
Potential Class:
Schedule:
Nap (Y/N):
Early Care (Y/N):
After Care (Y/N):
Projected Cost:
Amount Paid at Registration:
Accepted by:
Date:



CDC/SGH# or name: _____

**Arizona Department of Health Services
Bureau of Child Care Licensing
Emergency, Information and Immunization Record Card**

Child's Name:	Date Enrolled:	Updated:
Home Address (#, Street, City, State, Zip Code):		Date Disenrolled:
Home Phone:	Date of Birth:	Sex: ☐ male ☐ female

Parent or Guardian Name:	Home Address (#, Street, City, State, Zip Code):
Cell Phone (optional):	Contact Telephone Number:

Parent or Guardian Name:	Home Address (#, Street, City, State, Zip Code):
Cell Phone (optional):	Contact Telephone Number:

**I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted:
(Pursuant to R9-5-304.B, at least two contact persons are required.)**

Name:	Contact Telephone Number:
Name:	Contact Telephone Number:
Name:	Contact Telephone Number:
Name:	Contact Telephone Number:

If Medical care is necessary, call:

Health Care Provider*	Name:	Contact Telephone Number:
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*A Health Care Provider is a physician, physician assistant or registered nurse practitioner.

I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety.

In case of injury or sudden illness, I request that this individual be called first:	
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The following individual(s) may NOT remove my child from the facility:

Name(s):

Custody papers have been provided and are on file at the facility. ☐ yes ☐ no

Telephone Authorization Code (optional): _____

Immunization Information

(A licensee shall attach an enrolled child's written immunization record or exemption affidavit to the enrolled child's Emergency, Information and Immunization Record card.)

For information regarding current immunization requirements go to:

www.azdhs.gov/phs/immun/index.htm or contact the Arizona Immunization Program Office at (602)364-3630.

One of these items must accompany the EIIR card at all times:

☐	Copy of current official documented immunization record attached
☐	Religious Beliefs exemption form signed by parent/guardian attached
☐	Medical Exemption form signed by physician and parent/guardian attached
☐	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):	mo /day/ yr	mo /day/ yr	mo /day /yr
Updated immunizations received and attached:	mo /day/ yr	mo /day/ yr	mo /day /yr

Medical Information

Is child allergic to food or other substances? If yes, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:	☐ No ☐ Yes
Is child usually susceptible to infections and if so, what precautions need to be taken? If yes, list precautions:	☐ No ☐ Yes
Is child subject to convulsions and what should be our procedure if one occurs? If yes, specify procedure:	☐ No ☐ Yes
Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? If yes, list precautions:	☐ No ☐ Yes
Additional comments:	
Other special instructions:	

This **Emergency Information and Immunization Record Card** is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE:
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New Covenant Lutheran School Financial Policy

2026/2027 School Year

Student Name: _____ Application Date: _____

Please read the following financial policies and procedures. Both Responsible financial parties must initial and sign where indicated to acknowledge receipt and understanding. This agreement must be submitted with enrollment paperwork.

➤ **Payment and Fee Policies:** (____ initial) (____ initial)

- The Registration Fee is non-refundable, non-waivable, and non-negotiable. This fee is \$250 for every preschool and kindergarten student.
- The Materials Fee is non-refundable. This fee is \$150 for all students. This fee includes 4 “Parent’s Night Out” events, a children’s bible or complementary text, a yearbook, and speech and language screening with a licensed speech pathologist.
- Security deposits that have been made in prior years will be rolled into and satisfy the Materials Fee for one child. All other children will be charged the Materials Fee of \$150, which will be due with application.
- The Security Assessment Fee is a monthly \$30 charge per family, in addition to the tuition cost. This Security Assessment Fee helps to maintain our upgraded security on campus, including but not limited to video surveillance, campus wide fencing, and secure access gates and doors.

➤ **Tuition Policies:** (____ initial) (____ initial)

- Tuition rates are determined on an annual basis but paid monthly over the course of 10 months.
- The first month’s tuition (August) is due on June 1st, and all other months are due the first day of the month prior.
- Holidays, school closures, and half days are considered when determining the annual tuition for each program.
- Refunds and make-up days are not offered for any absences.
- All fees and tuition rates, including extended care, are subject to change at any time.
- All drop offs/pickups outside of the 10-minute grace period of your contracted schedule is subject to a \$16/hour charge.
- Extended care is available on an as-needed basis between 7am and 8:40am, or 3pm and 6pm. The hourly charge for extended care is \$16/hour, which is only charged by the hour.
- Autopay that has been set up through the New Covenant website, to withdraw directly from your bank account must be cancelled after May tuition is processed, in April. The autopayment system does not go into a hold status, save, or roll to the following school year or the next time you owe on your account (i.e., Summer Camp or the following school year).

- Autopay amounts do not automatically adjust to accommodate fluctuating balances. **Please open each statement each month, to ensure that your balance is paid.** Statements are emailed monthly but are always available upon request.

- All credit card payments will incur a 3% processing fee. This fee is applied to the account after the payment is made.

- Debit card payments do not incur a processing fee. Processing fees are automatically added to accounts, unless the accountholder informs the New Covenant school office that a debit card was used. It is the responsibility of the family to relay this information.

➤ **Schedule Changes:** (____ initial) (____ initial)

- Schedule changes resulting in a lower tuition rate will not result in a credit/refund when occurring after the first of the month. The new tuition rate will be reflected in the following month's billing.

- Any schedule change requests that can be fulfilled will begin the following week, unless accommodation can be made for the current week. All schedule change requests must be approved by the office.

➤ **Payment Due Dates:** (____ initial) (____ initial)

- The first tuition payment is due on June 1, 2026 and will be applied to August tuition. Monthly tuition payments are non-refundable.

- All tuition payments and current charges are due on the first of the month prior to the month the student will attend. Ten separate monthly tuition payments will be paid throughout the year on the following schedule:

Tuition Month	Payment Due	Late Fee Charged	Final Day for Refund/Withdrawal without responsibility
August	June 1, 2026	June 6, 2026	May 29, 2026
September	August 1, 2026	August 6, 2026	July 31, 2026
October	September 1, 2026	September 6, 2026	August 31, 2026
November	October 1, 2026	October 6, 2026	September 30, 2026
December	November 1, 2026	November 6, 2026	October 30, 2026
January	December 1, 2026	December 6, 2026	November 30, 2026
February	January 1, 2027	January 6, 2027	December 18, 2026
March	February 1, 2027	February 6, 2027	January 29, 2027
April	March 1, 2027	March 6, 2027	February 26, 2027
May	April 1, 2027	April 6, 2027	March 31, 2027

- A 5-day grace period is given beyond the monthly tuition due date. If payment has not been made by the end of the day on the 5th day of the month, a \$25 late fee will be applied to the account. Late fees will continue to accrue each month for past due balances.

- The final tuition payment for the current school year will be due on April 1, 2027. For those families who are enrolled in autopay, please make sure to cancel your auto-payments for the summer months. This is not the responsibility of the school.

➤ **Withdrawal: (____ initial) (____ initial)**

- Withdrawal forms can be requested from the school office, via email or in person.
- Withdrawal forms must be completed and returned to the office at least 30 days prior to the requested withdrawal date. In addition to a withdrawal form, an email notification dated prior to the last business day of the month must be sent to registration@newcovenantaz.org.
- If the withdrawal notice is given after the last day of the month, then the family will be responsible for paying the full tuition payment that is due on the first of that month, regardless of withdrawal date or final day of class. Please refer to chart above for clarification. *(Ex., to withdraw from school beginning on December 1, the withdrawal form and notice would need to be turned in by October 30. If the withdrawal notice is given after the deadline, then the family will be responsible for paying the full amount for December tuition, on or before November 5, regardless of actual last day of attendance.)*
- For parents with multiple children attending New Covenant, all the above rules apply to each individual child, regardless of whether siblings are remaining enrolled.
- No refunds/credits will be applied for paid tuition, extended care, or other applicable fees.

➤ **Account Policies: (____ initial) (____ initial)**

- Charges to accounts can be added at any time during the school year and any errors made by administration that result in being undercharged will not waive your responsibility for payment.
- Families are responsible for all charges on their account, despite timing or delay in posting charges to the account (i.e. extended care, added days, fundraisers, etc.)
- All accounts must be paid in full to register a child (current student or sibling) for future school years and/or Summer Camp.
- Unpaid balances, including monthly tuition, late fees, and extended care must be paid within 30 days of posting to the account (unless prior arrangements have been made with the office).
- In the event of an unforeseen school closure, a decision regarding payments and/or refunds will be left to the discretion of the New Covenant Lutheran School Director and the New Covenant Lutheran Church Board of Ministry.

By signing below, you agree to be held financially responsible for the child(ren) listed at the top of this form. You understand and agree to comply with the above terms and conditions as they relate to your child's enrollment and account at NCLS. Completed forms must be turned in with enrollment paperwork.

Signature of Financially Responsible Parties:

Financially Responsible Party #1 _____ Relationship to the student: _____
Print Full Name

Financially Responsible Party #1 _____ Date: _____
Signature

Financially Responsible Party #2 _____ Relationship to the student: _____
Print Full Name

Financially Responsible Party #2 _____ Date: _____
Signature