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

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, 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.

Office use only- Application #: _____
Staff Initials: _____ Date: _____

2026/2027 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 CLEARY↓

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 <u>MAY NOT</u> 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 =

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: