Kimball Area ECFE Class Registration Form

Please fill out the form below to register for an ECFE class or 6-week session.

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Guardian Name(s):	Cell Phone:		
Address:	Cell Phone:		
City:	Zip Code:		
E-mail Address:			
	Through 8th Grade • High School • Associate Degree Bachelor's Degree • Master's Degree • Doctorate Degree		
Parent Employment Status (circle one): • Full-time • Less than 25 hours/week • More than 25 hours/week • Unemployed, seeking employment • Unemployed, not seeking employment			
Child's Full Name:	Child's Gender (circle one): Male Female		
Child's Date of Birth:	Child's Primary Language:		
Child's Ethnicity (circle one):			
• Native American • Asian • Africa	n American • Hispanic • Pacific Islander • Caucasian • Latino		
Class Choice:	Session (circle): Fall Winter Spring		
Annual Household Income: \$	Number of people in Household:		
Class Fee (from scale below): \$			

Kimball ECFE Sliding Fee Scale

ECFE Class Fees

Family's Yearly Gross Income	Class Fee 6 Week Session Per Child	Fee for Addit'l Child
\$0.00-\$19,999.99	\$15.00	\$5.00
\$20,000-\$39,999.99	\$22.50	\$6.00
\$40,000-\$59,999.99	\$37.50	\$7.00
\$60,000-\$79,999.99	\$52.50	\$8.00
\$80,000-\$99,999.99	\$67.50	\$9.00
\$100,000.00+	\$85.00	\$10.00

All families are welcome at ECFE!

No one will be turned away from an ECFE parent/
child class due to financial challenges. If financial
assistance is needed, please contact Kate Simon at
320-398-7700 X 2802 or email:
kate.simon@kimball.k12.mn.us.

Class fees are per child/per class or session. Make checks payable to Kimball Schools ISD 739.

Thank you, we look forward to seeing your family in class.