

Faith Lutheran Preschool

2018/2019 Registration



Child's name _____ M / F

Name that will be used in class _____ Date of Birth _____ Age _____

T-Shirt Size? XS S M

Mother's Name _____ Home Phone _____

Address _____
(Number and Street) (City, State, Zip code)

E-Mail Address _____ Cell Phone _____

Employer _____ Work Phone _____

Father's Name _____ Home Phone _____

Address _____
(Number and Street) (City, State, Zip code)

E-Mail Address _____ Cell Phone _____

Employer _____ Work Phone _____

Childcare Provider _____ Phone _____

Person to contact in an emergency _____ Phone _____

Physician _____ Phone _____

Does your child have any known allergies? _____

Is your child currently taking any medication? _____

Are you or your child a member of a church? Y N Has your child been baptized? Y N

Name of Congregation _____

Has your child ever attended preschool? Y N

If yes, please give the name of the school and teacher. _____

(Over)

How did you hear about Faith Lutheran Preschool?

Is there any other information you believe would be beneficial to the teachers of your child?

Class Time Selection:

_____ 3 year-old class Thursday-Friday, 9:00 a.m. – 11:30 a.m.

_____ 3 year-old class Thursday-Friday, 12:30 p.m. – 3:00 p.m.

_____ 4/5 year-old class Monday-Wednesday, 9:00 a.m. – 11:30 a.m.

_____ 4/5 year-old class Monday-Wednesday, 12:30 p.m. – 3:00 p.m.

Agreement:

I agree to accept all the regulations of Faith Lutheran Preschool on behalf of my child. I have submitted with this application my Registration Fee of \$75.00. I understand that this fee will be refunded if Faith Lutheran Preschool is unable to accept my child, but it will not be refunded if, after my child is accepted, I choose not to send my child to Faith Lutheran Preschool.

Parent Signature

Date

Fees:

Registration fee: \$75.00 (*This must be included with registration form to guarantee enrollment*)

3 year-old class: \$80.00 per month

4/5 year-old class: \$90.00 per month