

# Christ Lutheran Preschool

## Application for Enrollment      2010-2011

Enrollment is on a “first come, first served” basis.  
Enrollment is not considered ‘complete’ until completed application, immunization records,  
and birth certificate are on file and the registration fee has been paid.

**Enrollment Requirements: All children must be potty trained.**

**Must be 3 or 4 (for appropriate class) by Sept 1, 2010**

I am registering my child for (circle choice):

(3 year old) 2 Day/Week Class (Tuesday/Thursday) Morning

Fees: \$100/Month Tuition & \$75 **NON REFUNDABLE** Registration

(4 year old) 3 Day/Week Class (Tuesday/Wednesday/Thursday) Morning      Afternoon

Fees: \$125/Month Tuition & \$75 **NON REFUNDABLE** Registration

**Total Due at time of Enrollment: \$75 NON REFUNDABLE Registration Fee.**

**Tuition is due the first full week of classes each month**

Make checks payable to **Christ Lutheran Preschool**

Child’s Full Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Mother’s Name: \_\_\_\_\_ Father’s Name; \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Sex: M / F

Child’s Preferred Name or Nickname \_\_\_\_\_

Email Address: \_\_\_\_\_

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

**Persons authorized to pick up child:**

Child Information:

Does your child have any allergies? \_\_\_\_\_

Are there any medical needs that the staff should be aware of?

Is your child right or left handed? \_\_\_\_\_

What words or actions does your child use for toileting?

\_\_\_\_\_

Church Information:

Has your child been baptized? \_\_\_\_\_

Would you like information about Christ Lutheran Church? YES NO

Are you members at a local church? YES NO If so, which one? \_\_\_\_\_

What is your child's concept of God? \_\_\_\_\_

How did you hear about Christ Lutheran Preschool?

- I am a member of the church
- I saw the banner along the street
- Through a member of the church
- Phone Book
- I have had another child enrolled at Christ Lutheran Preschool
- Web Site
- Other: \_\_\_\_\_
- Through a friend who has a child enrolled

Parental Financial Agreement: (Initial next to each statement and then sign the bottom)

- \_\_\_\_\_ • Tuition is due during the first full week of classes of every month.
- \_\_\_\_\_ • Payment arrangements must be made with the director, not the teacher, and must be made prior to any late payments.
- \_\_\_\_\_ • Late payments will result in a fee of \$10 per month.

Would you like information on financial aid? YES NO

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only**

<b>Date Received:</b> _____	<b>Registration Amount:</b> _____	<b>Paid On:</b> _____	<b>Check #:</b> _____
<b>Birth Certificate:</b> _____	<b>Immunization:</b> _____	<b>Waiting List #:</b> _____	
<b>Approved By:</b> _____		<b>Date:</b> _____	