



Trinity Lutheran School

Preschool Registration Form

2020-2021

Child Information:

Child's Name (first, middle, last) _____

Address _____ City _____ Zip Code _____

Home Phone _____

Child's Age _____ Date of Birth _____ Gender _____

Parent Information:

Mother/Guardian Name _____ Work Phone _____

E-mail _____ Cell Phone _____

Father/Guardian Name _____ Work Phone _____

E-mail _____ Cell Phone _____

Person(s) with legal custody of child and relationship _____

Are you a member of a church? Yes / No

Is your child baptized? Yes / No

Church Name and Address _____

(if applicable)

Name of adults able to pick up child: _____

Medical Information:

Are there any unusual factors in the child’s life? (adoption, absence of father or mother, unusual accidents, or serious illnesses in the family)

Does the child have a modified diet? Yes / No

If yes, please give us that information: _____

Does your child have any allergies? Yes / No

If yes, please list the allergies: _____

More Information (optional)

My child would like to purchase a Trinity Lutheran School yearbook for \$20.00: Y / No

Names and ages of younger children at home:

Are you looking for an elementary school after preschool? Yes / No

Preschool Options: (Please check the appropriate box)

Monday, Wednesday, Friday (full days) - \$250.00/month

Tuesday, Thursday (half days) - \$80.00/month

Both Options - \$330.00/month

We agree to pay our monthly bill depending on the option chosen and the \$50.00 registration fee that must be submitted with the application in order to reserve a spot for our child.

Parent’s Signature _____ Date _____

*** Note the child’s physical must be taken after July 1, but before September 1.***

**** Child must be 3 or 4 by August 1st of enrolling school year****

*****Child must be fully potty trained*****

****** Deadline to submit registration form is May 31, 2019.******