



TRINITY LUTHERAN SCHOOL

105 Allen Street
Jenera, Ohio 45841
419.326.4685

email: tsoffice@tlcjenera.org

Preschool Registration Form 2021-2022

Child information:

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

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Child's Age: _____ Date of Birth: _____ Gender: Girl Boy

Has your child ever been part of an I.E.P. (Individualized Education Program)? Yes No

If so, please include a current copy of your child's last or most recent I.E.P.

Has your child attended preschool anywhere else? Yes No

Where? _____

Parent Information:

Mother/Guardian Name: _____ Phone: _____

Email: _____ Work Phone: _____ Cell: _____

Father/Guardian Name: _____ Phone: _____

Email: _____ Work Phone: _____ Cell: _____

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

Are you a member of a church? Yes No Has your child been baptized? Yes No

Church name and address: _____

Name and contact information of adults able to pick up child:

Medical Information:

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

Does your child have a modified diet? _____ Yes _____ No

If yes, how so? _____

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: _____ Yes _____ No

Names and ages of younger children at home:

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

Preschool Options:

___ Monday, Wednesday, Friday (full days) - \$250/month (for 4 & 5 year olds who are eligible for Kindergarten next year.

___ Tuesday, Thursday (half days) - \$80/month (for 3 & 4 year olds who are *unable* to attend Kindergarten next year. Also for 4 & 5 year olds who are unable to attend Kindergarten *this* year.)

We agree to pay our monthly bill depending on the option chosen and the \$50.00 non-refundable 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 done after July 1, but before September 1.***

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

*****Child must be independently potty trained*****

****** Deadline to submit registration form is May 31, 2021. ******