



Application for Enrollment

2017- 2018 School Year

7929 La Mesa Blvd
La Mesa, CA 91942
619.462.5211x103
lutheranschool.org

Date of Application: ___/___/___

STUDENT INFORMATION

Last Name: _____ First: _____ Middle: _____

Name Child is Called: _____

Date of Birth: ___/___/___ Place of Birth: _____ Gender: ___ Male ___ Female

Race: (For statistical purpose only) ___ African-American ___ Caucasian ___ Hispanic ___ Asian ___ Other _____

Date of Baptism: ___/___/___ Church: _____ Denomination: _____

Has your child had previous group experience? _____

If yes, please explain _____

FAMILY INFORMATION

Student resides with (Check one):

___ Both Parents ___ Mother ___ Father ___ Guardian ___ Shared Custody

	PARENT/GUARDIAN #1	PARENT/GUARDIAN #2
First and Last Name (please print)		
Home Address		
City, State, Zip Code		
Phone Number		
Email Address		
Occupation		
Employer Name		
Business		
Cellular Telephone		
Relationship to the student		

Brother(s)/Sister(s)

Name: _____ DOB: _____ Grade: _____ School: _____

Name: _____ DOB: _____ Grade: _____ School: _____

Name: _____ DOB: _____ Grade: _____ School: _____

Please list any other persons living with, and their relationship (if any) to the child. _____

(Continued on back)

GENERAL INFORMATION

How did you come to know about Christ Lutheran Preschool? _____

Does your child have any special needs of which we should be aware? _____

Special medical concerns of which we should be aware? _____

Allergies, Asthma, Allergic reactions, etc. _____

Medications _____

Doctor(s) Contact Information _____

ENROLLMENT INFORMATION

I wish my child to be enrolled: (circle all days applied) **MON TUE WED THUR FRI**

Start Date: _____ **Drop off time:** _____ **Pick up time:** _____

Please initial if potty trained _____

I understand my monthly fee will be \$ _____ and is due the 1st of each month. I understand that a late fee (see Handbook page 8) will be assessed for payments received after the 10th of each month. I also understand that I will be charged an additional hourly rate, and may be subject to a new monthly fee, if my child stays at preschool beyond their agreed schedule. All schedule changes must be approved in writing by the director.

I/We acknowledge that Christ Lutheran School and Preschool uses photographs of our Child/Children for publicity purposes associated with the school program, videos, facebook, and website.

Please read the following statement and sign the application below:

The 2017-2018 school year begins August 30, 2017 and concludes June 13, 2018. The tuition fees for part time and full time schedules are based on 10 equal monthly payments, Sept. 2017 through June 2018. The summer program, which begins June 18, 2018, is a separate weekly charge.

For admission of my child to Christ Lutheran Preschool, I agree to pay the tuition charges and fees as established by the administration for the year 2017 - 2018. I pledge to support my child's development by working cooperatively with the Christ Lutheran Preschool staff, adhering to the school's policies and procedures.

Signature of parent/guardian: _____ Date: _____

Signature of parent/guardian: _____ Date: _____

Please return this form to the Admissions Office at 7921 La Mesa Blvd., La Mesa, CA 91942. The registration fee must accompany this application for enrollment. The registration fee is non-refundable unless the child is not accepted for enrollment.

For Office Use Only
Application received _____
Registration fee _____
Check number _____