



# Application for Enrollment

2018- 2019 School Year

7929 La Mesa Blvd  
 La Mesa, CA 91942  
 619.462.5211x103  
 lutherschool.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 2018-2019 school year begins August 27, 2018 and concludes June 12, 2019. The tuition fees for part time and full time schedules are based on 10 equal monthly payments, Sept. 2018 through June 2019. The summer program, which begins June 17, 2019, 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 2018 - 2019. 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 \_\_\_\_\_