



# Preschool Application Form

**OFFICE USE ONLY**

Date received: \_\_\_\_\_ Fee paid:

**APPLICATION DATE** \_\_\_\_\_

Enrollment for children ages 3-5 years, Monday, Wednesday & Friday 9am—11:30am. Please complete this form and remit the \$50 non-refundable application fee to Atonement Lutheran Preschool. Tuition is \$150.00 per month.

**STUDENT INFORMATION**

Date of Birth \_\_\_\_\_ Gender  Male  Female  
Fees Paid \_\_\_\_\_ Total Amount \_\_\_\_\_ Check Number \_\_\_\_\_  
Person who received application \_\_\_\_\_  
Student's Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
Class/Teacher Assignment \_\_\_\_\_  
Home Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Family Email \_\_\_\_\_

**GUARDIAN INFORMATION**

Father's Name \_\_\_\_\_ Business Phone \_\_\_\_\_  
Occupation/Company \_\_\_\_\_ Position/Title \_\_\_\_\_  
Business Address \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Business Phone \_\_\_\_\_  
Occupation/Company \_\_\_\_\_ Position/Title \_\_\_\_\_  
Business Address \_\_\_\_\_  
Marital Status  Married  Single  Divorced  Widowed  
Child lives with  Both parents  Mother  Father  Other \_\_\_\_\_

**Please list all siblings living in the household:**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

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## MEDICAL INFORMATION

Does your child have any medical conditions (chronic illnesses or allergies) that we should be aware of?

Yes  No

Does your child require medication for any condition?

Yes  No

If you answered **Yes** to either of these questions, please explain.

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Doctor's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Is your child up to date on vaccinations?

Yes  No

*If no, please provide adequate waivers.*

## CHURCH INFORMATION

Name of Church \_\_\_\_\_ Are you a member?

Yes  No

Church Address \_\_\_\_\_

Pastor's Name \_\_\_\_\_

## ADDITIONAL INFORMATION

How did you hear about Atonement Lutheran Preschool? Please give names where possible.

Alumnus \_\_\_\_\_ Current Student \_\_\_\_\_ Minister \_\_\_\_\_

Advisor/Teacher \_\_\_\_\_ Advertisement \_\_\_\_\_

Website \_\_\_\_\_ Other \_\_\_\_\_

