



2012-2013 PRESCHOOL and PREKINDERGARTEN APPLICATION

FAMILY INFORMATION

Student's name _____ M _____ F _____
(Last) (First) (Middle)

Address _____
(Street & Number) (City) (Zip)

May we include your address in the school directory given to parents? Yes No

Telephone _____ Marital Status of Parents _____
May we include your home phone number in the school directory? Yes No

Date of birth _____ Where? _____ Citizenship _____

Name of Father _____ Name of Mother _____

Father or Mother's Address (if different) _____

Father's Cell Phone: _____ Mother's Cell Phone: _____
Include father's cell in the school directory? Yes No Include mother's cell in the school directory? Yes No

Father's Email: _____ Mother's Email: _____

Father's Place of Work _____ Mother's Place of Work _____

Father's Work Phone # _____ Mother's Work Phone # _____

Emergency name and phone number of friend or relative in town _____

List names and ages of other children in family (give birthdates) _____

CHURCH INFORMATION

Date of student's baptism _____ Where? _____

Church membership of student _____

Church Membership: father _____ mother _____

SCHOOL INFORMATION

School district in which child lives _____

Previous preschool(s) child attended _____

HEALTH INFORMATION

Pediatrician's name & phone number _____

Does your child have any allergies? _____ Does your child require medication during school hours? _____

Does your child have any serious illnesses? _____ Is your child unable to participate in physical activities? _____

Has your child been diagnosed or tested for developmental delays? _____

If you answered yes to any of the above questions, please explain: _____

OTHER INFORMATION

Where did you hear about us? Did anyone refer you? _____

Please explain any special circumstances that we should be aware of (educational needs, divorce, special custody arrangements, etc.)

PRESCHOOL SESSION DESIRED (CHECK ONE BOX)

DISCLAIMER: You're signing up for a class, not a particular teacher. Availability of a particular class is subject to meeting minimum enrollment numbers.

Registration fee: \$150

<input type="checkbox"/>	3-yr-old Tuesday/Thursday mornings	9:00am – 11:30am	\$1200 annually
<input type="checkbox"/>	3-yr-old Monday/Wednesday/Friday mornings	9:00am – 11:30am	\$1500 annually
<input type="checkbox"/>	3-yr-old Monday through Friday mornings	9:00am – 11:30am	\$2000 annually
<input type="checkbox"/>	4-yr-old Tuesday/Thursday afternoons	1:00pm – 3:30pm	\$1200 annually
<input type="checkbox"/>	4-yr-old Monday/Wednesday/Friday afternoons	1:00pm – 3:30pm	\$1500 annually
<input type="checkbox"/>	4-yr-old Monday through Friday afternoons	1:00pm – 3:30pm	\$2000 annually
<input type="checkbox"/>	Prekindergarten Monday-Friday mornings	8:45am – 11:45am	\$2100 annually
<input type="checkbox"/>	Prekindergarten Monday-Friday afternoons	12:45pm – 3:45pm	\$2100 annually

Tuition may be paid annually by September 15 for a 3% discount rounded to the nearest dollar or in ten equal installments beginning August 1.

Please submit **application with \$150 non-refundable registration fee** to:

*Shepherd of the Lakes Lutheran School
2101 S. Hacker Rd.
Brighton, MI 48114*

Make checks payable to: *Shepherd of the Lakes (SOTL)*

For office use only

Date received _____ Registration fee paid? _____ Check Number _____ Principal approval of admission _____