

Preschool	∖nnlicati	on Form
LIESCHOO!	Applicati	

OFFICE USE ONLY Date received:	Fee paid:

APPLICATION DATE	<del></del>
or a \$75 nonrefundable application fee (a	O nonrefundable early application fee (on or before March 22) ifter March 22) to Atonement Lutheran Preschool. fundable. October–May tuition due the 10 <sup>th</sup> of the prior month.
CLASS CHOICE	
Preschool: Ages 3–5 years M/W/F	9:00am–11:30am\$135.00/month 9:00am–11:30am\$185.00/month H/F9:00am–12:00pm\$265.00/month
STUDENT INFORMATION	
Date of Birth	Gender
Child's Name	Preferred Name
Child's Address	
Contact Phone	Family Email
GUARDIAN INFORMATION	
Mother's Name	Contact Phone
Home Address	Email
Place of Employment	Work Phone
Occupation	
Father's Name	Contact Phone
Home Address	Email
Place of Employment	Work Phone
Occupation	
Marital Status Married S	ingle Divorced Widowed
Child lives with $\square$ Both parents $\square$ M	other
Please list all siblings living in the house	nold:
Name	
Name	
Name	0
Name	Date of Birth
	Continued on bac

## **Preschool Application Form**

MEDICAL INFORMATION				
Does your child have any	medical conditions (d	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 <b>Yes</b> to ei	ther of these question	ns, please explain.		
Doctor's Name		_ Phone Number		
Is your child up to date on vaccinations?  If no, please provide adequate waivers.			Yes	☐ No
CHURCH INFORMATION				
Name of Church		_ Are you a member?	Yes	☐ No
Church Address				
Pastor's Name				
ADDITIONAL INFORMAT	ION			
How did you hear about	Atonement Lutheran	Preschool? Please give names	where possible.	
Alumnus	Current Stude	nt Mir	nister	
Advisor/Teacher	Advertisemen	t		
Website	Other			
Atonement Lutheran Pre Wednesday/Thursday be	·	the Wednesday/Thursday aft	ter Labor Day to th	e
AONEMENT Lutheran PRESCHO	OL IIIIII			
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