

MESSIAH LUTHERAN PRESCHOOL  
25225 W. Ivanhoe Rd  
Wauconda, IL 60084  
526-7479

APPLICATION FOR ENROLLMENT  
Summer Classes  
2012

Child's Name \_\_\_\_\_ Boy \_\_\_\_\_ Girl \_\_\_\_\_

Child's Birth Date \_\_\_\_\_ Nickname (if used) \_\_\_\_\_

Child's Address \_\_\_\_\_ Phone # \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Billing Address (if different than above) \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

**THIS APPLICATION MUST INCLUDE A NON-REFUNDABLE REGISTRATION FEE OF \$10 PER CHILD.** Make checks payable to MESSIAH LUTHERAN PRESCHOOL. Check will be returned only if your child does not get into a class.

All classes run Monday – Thursday from 9:00 a.m. – 12:00 p.m. Tuition is \$85.00 per class.

These classes will be held primarily outside. Please send your child prepared with sunscreen, insect repellent, protective clothing (i.e. sunglasses, hats, etc) already applied so they are ready to participate.	
Music & Movement Class June 18-21 _____ (3-5 year olds)	Music & Movement Class June 25-28 _____ (4-6 year olds)
Kindergarten Readiness June 18-21 _____ (4-6 year olds)	Outdoor Art Adventures June 25-28 _____ (3-5 year olds)
Cooking Up a Good Book June 18-21 _____ (4-6 year olds)	Cooking Up a Good Book June 25-28 _____ (4-6 year olds)
Outdoor Explorers July 16-19 _____ (4-6 year olds)	Outdoor Explorers July 23-26 _____ (3-5 year olds)
Bug Safari July 16-19 _____ (3-5 year olds)	Bug Safari July 23-26 _____ (4-6 year olds)

As a ministry of Messiah Lutheran Church, the purpose of our preschool is to offer neighboring communities a Christian preschool program which will provide qualified staff to help the children make a healthy transition from home to a school situation and which will provide a curriculum designed to meet their developmental and spiritual needs. Our classes regularly pray before snacks; we celebrate all Christian holidays and throughout our teaching we stress Christian values and talk about God and Jesus with the children. Messiah Lutheran Preschool does not discriminate on the basis of race, color, or national or ethnic origin in the administration of its educational policies, admissions policies, financial assistance programs and other school administered programs.

Parent Signature \_\_\_\_\_

**Parent Contact Information**

Father's Name: \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Your home phone number is the primary phone used for school communication. If you would like additional phone numbers used, please check the box next to the phone number above. Please check all email addresses you would like used for school communication.**

The Preschool has my permission to publish my phone number in the class list Yes: \_\_\_\_\_ No \_\_\_\_\_

The Preschool has my permission to publish my email address in the class list Yes \_\_\_\_\_ No \_\_\_\_\_

**Medical Information**

Physician: \_\_\_\_\_

Does your child have allergies? \_\_\_\_\_

Does your child have health factors we should be aware of? \_\_\_\_\_

Does your child receive special services or daily medication? \_\_\_\_\_

**Emergency Contact/Pick-up Authorization**

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Relationship</u>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			