



**Parent / Guardian Information**

Parent / Guardian Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

**Child's Information**

Child's Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender:  Male  Female

Church of Membership: \_\_\_\_\_ Baptized:  No  Yes Date: \_\_\_\_\_

Address (if different from parent / guardian): \_\_\_\_\_

Child resides with:  Mother  Father  Both  Other: \_\_\_\_\_

Other children in the family – please include name(s) and age(s):  
\_\_\_\_\_

Parents are:  Married  Separated  Divorced  Widowed  Other: \_\_\_\_\_

Custody Alert:  No  Yes Please explain: \_\_\_\_\_

Grade Level:  Preschool 3  Prekindergarten

Has your child had any previous group experience?  No  Yes Where? \_\_\_\_\_

Is there any additional information that will help with his/her care? \_\_\_\_\_  
\_\_\_\_\_

## Tuition and Fees

- Registration Fee: \$50.00 – due at the time of enrollment
- Half Day options (8:15 am – 11:30 am)
  - 3 days per week (Monday, Wednesday, Friday): \$1,775.00
  - 4 days per week (Monday – Thursday): \$2,125.00
  - 5 days per week (Monday – Friday): \$2,250.00
- Full Day options (8:15 am – 5:15 pm)
  - 3 days per week (Monday, Wednesday, Friday): \$2,575.00
  - 4 days per week (Monday – Thursday): \$3,575.00
  - 5 days per week (Monday – Friday): \$4,575.00
- Only the 4 and 5 days per week options are available for Pre-kindergarten.

## Payment Options

- One-time payment – 5% discount, due on or before the 1<sup>st</sup> day of school
- Monthly payments – due on the 1<sup>st</sup> of each month August 1 – May 1
- Bi-monthly payments – due on the 1<sup>st</sup> and 15<sup>th</sup> of each month August 1 – May 1

## Payment Method

- Cash or check – please make checks payable to Immanuel Lutheran School
- Electronic Funds Transfer – please complete and return the Authorization Form

**Please Note:** A late fee of \$25.00 will be applied if payment is not received by the due date.

## Authorized Pickup List:

Your child will only be released to the people on this list. If our teacher does not recognize the person picking up your child, a state issued identification card with a photo is required, and will be cross checked with this list.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you for enrolling in Immanuel Lutheran School!**