

FOR OFFICE USE ONLY

Preschool Year _____ A.M. P.M. AD Application Fee _____ Registration Fee _____
Receipt # _____ Check # _____ Date _____

APPLICATION FOR PRESCHOOL ENROLLMENT

**ST. JOHN'S LUTHERAN SCHOOL
300 JEFFERSON STREET
ALGONQUIN, IL 60102
(847) 658-9311**

Date of Application: _____

Appreciating the educational advantages offered by a Christian School, we hereby request that our child be enrolled as a student at St. John's Lutheran Preschool.

Child's Name: _____ Age: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Date of Birth: _____

Baptized: No _____, Yes _____ Year: _____

Are both parents living at home with child? _____. If not, please give reason and who has legal parental custody: _____

FATHER

MOTHER

Name: _____

Name: _____

Employer/Occupation: _____

Employer/Occupation: _____

Where Church Member: _____

Where Church Member: _____

Business Name: _____

Business Name: _____

Business Phone: _____

Business Phone: _____

If you are not a member of St. John's Lutheran Church, by who were you recommended or how did you find out about St. John's Lutheran Preschool? _____

In order to help understand your child, please list any disabilities or handicaps your child has. All information is held in the strictest confidence. _____

If you are not a member of a Lutheran Church-Missouri Synod, would you be interested in attending a series of lectures on the doctrines and teachings of the Lutheran Church? _____ Attendance at these lectures does not obligate you to become a member.

If an opening exists, I would prefer my child attend the following session:

_____ 4/5 year old AM Only (Monday, Wednesday, Friday) 9:00 a.m. – 11:30 a.m.

_____ 4/5 year old Full Day (Monday, Wednesday, Friday) 9:00 a.m. – 3:00 p.m.

_____ 3/4 year old Blended (Tuesday and Thursday) 9:00 a.m. – 11:30 a.m.

_____ 3/4 year old Blended (Tuesday and Thursday) 12:30 p.m. – 3:00 p.m.

Additional Comments: _____

Parent's Signature _____

Please return this form to the school office along with the following to have your child placed on the roster:

- 1) Your child's original Birth Certificate (a copy will be made in the office)
- 2) Application Fee (non-refundable)
- 3) Registration Fee (No refund after 1st day of school)
- 4) May's tuition, which will be refunded if your child does not attend St. John's.
(Please refer to the Tuition Schedule for the monthly rate and fees)

Upon receipt of this application and the 4 items listed above, your child will be guaranteed a place on the roster.