

EARLY CHILDHOOD ENROLLMENT FORM 2018-2019 School Year

Child's Name _____ Female ___ Male ___ Birthdate _____

Registering for (circle) : Preschool 2's Preschool 3's (3 by 8/1/2018) Pre-Kindergarten (3 by 8/1/2018)

Session preference – (circle one below or write request) _____

Pre-School 2	5 full days	3 full days (M, W, F)	2 full days (Tu & Th)
	5 half days	3 half days (M, W, F)	2 half days (Tu & Th)

Pre-School 3	5 full days	3 full days (M, W, F)	2 full days (Tu & Th)
	5 half days	3 half days (M, W, F)	2 half days (Tu & Th)

Pre-Kindergarten 4	5 full days	3 full days (M, W, F)
	5 half days	3 half days (M, W, F)

Tuition payment (choose one): Simply Giving One Time Payment (2%) Two Time Payment (1%)

School district of residence: _____

Name of Public school your child would attend in your district if not at OSLS: _____

Previous School Attended: Grade level(s): Address: _____

Student's Church Home _____ If baptized: Date _____

Child lives with: both parents Father Mother Other (please list) _____

Address _____ City _____ Zip _____

Home Phone/Primary Cell (if no landline) _____

Primary Email Address Contact _____

Please check if you are interested in further information about:

Extended School Care *Registration forms and the ESC handbook will be made available*
 Church membership at Our Savior

ALL students must have enrollment fee paid in full to complete registration.

NEW students must submit

- Birth Certificate
- Physical
- Immunization Record

Father/Stepfather's name: _____

Address (if different than child's) _____ Cell Phone _____

Employer _____ Occupation _____

His church (if different) _____ Denomination _____

Mother/Stepmother's name: _____

Address (if different from above) _____ Cell Phone _____

Employer _____ Occupation _____

Her church (if different) _____ Denomination _____

Brothers/sisters:

Name _____ Date of Birth _____ Grade _____ School _____

Name _____ Date of Birth _____ Grade _____ School _____

Name _____ Date of Birth _____ Grade _____ School _____

Name _____ Date of Birth _____ Grade _____ School _____

Office Use:
Date Received _____
Enroll Fee PD _____ in
Check # _____

Full

Statement of Non-Discrimination

Our Savior Lutheran admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school.