



## PRE-SCHOOL APPLICATION ADMISSION 2018-19

### Process for Student Enrollment

1. Complete all parts of this application (2 sides).
2. Submit copy of **Immunization record**.
3. All students must also submit the non-refundable **\$300 registration fee**.
4. **Sign Tuition Contract with Financial Manager**

For Office use only:

Envelope Number \_\_\_\_\_

Registration Fees paid Date \_\_\_/\_\_\_/\_\_\_ Check # \_\_\_\_\_

Added to:

Servant Keeper Date \_\_\_/\_\_\_/\_\_\_ Mail Chimp Date \_\_\_/\_\_\_/\_\_\_

Enrollment Roster Date \_\_\_/\_\_\_/\_\_\_ Staff Initials \_\_\_\_\_

### STUDENT INFORMATION

<b>Student Name:</b>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	<b>Were you referred to us by a current school or preschool family?</b> (circle one)    Yes    No
<b>Student Home Address:</b>			<b>If Yes, Whom?</b>
<b>City, Zip Code</b>			
<b>Date of Birth:</b>			<b>Language Spoken at Home:</b>
<b>Age:</b>	<b>Place of Birth:</b>		
<b>Previous School:</b>		<b>Phone &amp; Fax number of previous school:</b>	
<b>Address:</b>			
<b>Start Date:</b>	<b>Full Day</b> <input type="checkbox"/>	<b>3/4 Day</b> <input type="checkbox"/>	<b>Half Day</b> <input type="checkbox"/>
<b>End Date:</b>			M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/>

### GUARDIAN INFORMATION - Please list primary caregiver as #1

<b>Guardian #1/Name &amp; Relationship to Child</b>		Cell Phone	Residence Telephone
Residence Address		City, State, Zip	
Employed by	Best Email for School News	Business Telephone	Ext
Business Address		City, State, Zip	
<b>Guardian #2/Name &amp; Relationship to Child</b>		Cell Phone	Residence Telephone
Residence Address		City, State, Zip	
Employed by	Best Email for School News	Business Telephone	Ext
Business Address		City, State, Zip	

## CHURCH INFORMATION

<p>Name of church currently attending: _____</p> <p>Are you a member? Yes No</p> <p>Pastor's Name: _____</p> <p>Is this a WELS Church? Yes No</p> <p>Is this a Christian Church ? Yes No</p> <p>Are you active members of your church? Yes No</p>	<p><u>Is your child Baptized?</u></p> <p>Yes Baptism Date: _____ No</p> <p><u>Would you like your child to be Baptized?</u></p> <p>Yes No</p> <p><u>Is your child regularly attending church?</u></p> <p>Yes No</p> <p><u>Does your child regularly attend Sunday School?</u></p> <p>Yes No</p>
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***Parents, please read and initial each of these statements then sign and date the document on the appropriate lines.***

Initials	The Parent's Role at Reformation Lutheran School
	1. I have read the current school handbook for Reformation Lutheran School and agree to comply with all aspects of the handbook including but not limited to the specific items listed below.
	2. I understand that Reformation Lutheran School is a religious organization and a part of the Wisconsin Evangelical Lutheran Synod (WELS), who intends to instruct the children placed in its' care the doctrine of the WELS in accordance with the true Word of God as found in the Bible.
	3. I am willing to bring my child to sing with their class when they are scheduled to sing at Reformation Lutheran Church's worship services.
	4. I have read and understand the dress code policy of Reformation Lutheran School as found in the handbook and agree to comply with it
	5. I understand that discipline is an important part of education and I pledge to support the teachers and faculty in the discipline of my child. I will cooperate with the faculty and follow up with the discipline of my child at home if appropriate.
	6. I understand that pictures of my child may be used on Facebook, on the school/church website, or on promotional materials printed by the school, unless I give a written request to the principal asking that my child's picture not be used on these types of materials. (Please submit this request letter prior to the first day of school)
	7. I agree in advance to allow my child to attend all field trips both on and off campus and be transported by licensed adults, unless I send in a written note stating otherwise. I understand the school provides medical insurance to cover the cost of co-payment of an accident that occurs during a school organized activity.
	8. I will faithfully support the school through my prayers and positive attitude, and in keeping with Matthew 18:15, I am committed to giving a good report by sharing complaints and negative comments only with the people involved.
	9. I will fulfill my financial obligation to the school by paying my tuition, childcare, and registration bills in full and on time. I understand that the <b>F</b> inancial <b>R</b> esponsibility <b>C</b> ommittee will contact me if a problem arises with my payments. (See Financial Contract for details)
	10. I understand that the Reformation Lutheran School exists to assist me in the nurture and instruction of my child both academically and spiritually. Therefore I pledge to be involved and supportive as a parent by encouraging and participating in regular communication with my child's teacher and principal. I also agree to assist the work of the teacher by supervising my child's homework and see that it is done completely and on time on a daily basis.

I have read and agree to these requests.

\_\_\_\_\_

(Parent Name) (Please Print)

(Parent Signature)

\_\_\_\_\_

(Date)