

St. Paul's
Lutheran
Church

605-725-1855

214 7th Ave. SW

605-225-1847

Application for Enrollment

Please complete this application and return it with the \$75 application fee and completed immunization record to the preschool or church office. (Application fee is used to purchase required student curriculum)

Child's Name:			Nickname:				-		
Gender:	Male	Female	Student	Birthdate:				_	
Parent/G	<u>vardian</u>	<u>#1</u>							
Name:									
			•	e should be sent?	Yes	No			
Does chil	d reside	at this location c	over half the tim	ie? Yes No					
Employer	:		Occup	pation:					
Phone nu	mber:		E-	mail:					
		#2 (if parents do	-	-					
Name:									
Address:									
		ess where bills/c at this location c	•	e should be sent? he? Yes No	Yes	No			
Employer	:		Occup	pation:					
Phone nu	mber:		E-	mail:					
Church N	lembers	hip							
				omination:					
We would	d like a v	isit from the Paste	or of St. Paul's L	utheran Church	Yes	No			
<u>Our Presc</u>	hool Op	<u>tions</u> : Monday-F	riday (Must be	4 by Sept. 1, 2025 u	inless app	oroved by	teacher)		
Full Days:	ull Days: \$600/mo. (No Aftercare) (8:00-3:15)			\$675/mo. w/aftercare (8:00-5:30)		Aftercare: (Please circle days needed M T W TH F			

The Lighthouse Preschool does not discriminate on the basis of gender, race, color, or national origin in the administration of our educational policies, employment practices, admission policies, administrative policies, financial aid, athletics or other school administered programs.