

St. Paul's Lutheran Church

605-725-1855

school administered programs.

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 Nan	ne:		Nickname:							
Gender:	Male	Female	Female Studer			nt Birthdate:				
Parent/Gua	ırdian #1									
Name:										
Address: Is the abov	e addres	s where bills/corre	spondence	e shoul	d be sent?	Yes	No			
		this location over								
Employer: _				_	Occupatio	on:				
Phone num	ber:			_	E-mail:					
		(if parents do not	-	-						
Address:										
		s where bills/corre	•			Yes	No			
Does child	reside at	this location over	half the tim	ne?	Yes No					
Employer: _				_	Occupatio	on:				
Phone num	ber:			_	E-mail:					
Church Me	mbership									
We would I	ike a visit	from the Pastor of	f St. Paul's L	utherc	in Church	Yes	No			
<u>Our Presch</u>	ool Optic	ons : Monday-Fric	day (Musti	be 4 by	v Sept. 1, 2025	ō unless ap	proved by t	eache	r)	
	lo Afterco)-3:15)	re) With After (8:	rcare \$675/ 00-5:30)	mo.	(Please circ N		ftercare is no TH F	eeded))	
***The follow	ving full d	ay classes are wai	tlisted. You	will be	notified in Ju	ne if there	is availabili	ty for y	our c	hild.
*M/T/TH/F \$4	480/mo.	*M/T/TH or T/TH/F	\$360/mo.	*T/TH	\$240/mo.	Afterc	are \$7/day	ΜT	TH	F
•		ol does not discriming s, employment pract		•			-			