

REGISTRATION FORM

Christ Our Savior Lutheran Preschool

4610 Belding Road, Rockford, MI 49341 | (616) 866-1881 | cosrock.org
Linda Gauger, Director: lindagauger@live.com, m.: (616) 866-0611

Fee:

Folder:

Visit:

Check the class you are requesting.

3 Year Old Class – Mon. & Wed.
(9:15 – 11:45 am.) \$110 / month

4 Year Old Class – Mon. & Wed. & Fri.
(9:00 – 11:30 am.) \$135 / month

3 Year Old Class – Tues & Thurs
(9:15 – 11:45 am.) \$110 / month

4 Year Old Class – Tues. & Thurs.
(9:00 – 11:30 am.) \$110 / month

4 Year Old Class – Tues. & Thursday
(9:00 a.m. – 12:30 p.m.) \$125 / month

Child's Name _____
(Last) (First) (Middle)

Nickname _____ Male ___ Female ___ Date of Birth _____

Street Address _____

City _____ State _____ Zip Code _____

Has your child previously attended preschool, day care, story hour, etc.? _____

How did you hear about our preschool?: _____

Church you regularly attend _____

Is there anything you want your child's preschool teacher to know (ie allergies, developmental issues - speech, behavioral, etc)? _____

Mother's Name _____

Mother's Address if different than child's _____

Mother's Email _____ Cell Phone _____

Father's Name _____

Father's Address if different than child's _____

Father's Email _____ Cell Phone _____

List brothers, sisters and/or other persons living in the home:

Name _____ Age _____ Relationship to Preschooler _____

*A non-refundable registration fee of \$50.00 is due with this registration form.
Please make check payable to "Christ Our Savior Lutheran Church"*