

# PARENT AUTHORIZATION FORM

**PLEASE READ THE FOLLOWING STATEMENTS AND AKNOWLEDGE IN THE APPROPRIATE SPACES.**

**SCHOOL POLICIES:** I/We submit this enrollment application, agreeing to the fees and policies of Lamb of God Lutheran Preschool. Admission may be withdrawn at any time if information provided in the application, or other admission documents, or interviews are not complete and accurate.

Parent/Guardian

\_\_\_\_\_ Initial

\_\_\_\_\_ Initial

**FINANCIAL POLICIES:** I/We understand registration fees are non-refundable. Tuition payments are due on the 1<sup>st</sup> of each month. The preschool may hold records if tuition or other school related bills are not fully paid. Our child will be suspended and our account be turned over to collections if not paid within 60 days of due date.

Parent/Guardian

\_\_\_\_\_ Initial

\_\_\_\_\_ Initial

**PHOTO PUBLICITY RELEASE:** I/We grant permission for any photographs taken involving my child while a student at Little Lambs of God Lutheran Preschool to be used in connection with publicity (web site, newsletter, brochures, school video, etc.) of Lamb of God Lutheran Preschool/School.

Parent/Guardian

\_\_\_\_\_ Initial

\_\_\_\_\_ Initial

**I HAVE READ ALL OF THE ABOVE STATEMENTS**

Father/Guardian Signature

\_\_\_\_\_

Mother/Guardian Signature

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