

Little Lambs of God Lutheran Preschool

6220 N. Jones Blvd., Las Vegas, NV 89130
Telephone: (702) 645-5229 Fax: (702) 645-6031
www.lambschool.org logschool@lambschool.org

For Office Use Only:	
_____ Registration Form	
Ck # _____	CC _____
_____ Emergency Form	
_____ Doctor's Exam	
_____ Enrollment Contract	
_____ Treatment Consent	
_____ Parent Release Form	
_____ Immunizations	
_____ Family Handbook	
_____ Permission Slip/Release	
_____ NRS432A.178	
_____ QB	
_____ RenWeb	
_____ Start Date	

Registration Form (Preschool) 2010-2011 School Year

To finalize your child's registration at Little Lambs of God Lutheran Preschool the following will need to be done:

1. Return the registration form along with your registration fee, made payable to Lamb of God.
Registration fees are nonrefundable.
2. Please provide a copy of your child's immunizations, and physician signed *well-check* form. Your child will not be allowed to begin school until these documents are on file.
3. Return the completed Emergency Information Sheet.
4. Return the completed Enrollment Contract.

PART 1 - CHILD INFORMATION

_____			GENDER: M F	
LAST NAME	FIRST	MIDDLE	CIRCLE	
_____		CITY	STATE	ZIP CODE
ADDRESS	_____		_____	
PHONE #	DATE OF BIRTH	CHURCH MEMBERSHIP		

PART 2 - PARENT/ GUARDIAN INFORMATION

Circle Main Contact Number

_____			EMAIL ADDRESS		
FATHER/GUARDIAN NAME			_____		
ADDRESS/APT #	CITY	STATE	ZIP	HOME PHONE	
_____	_____	_____	_____	_____	
OCCUPATION	EMPLOYER	WORK PHONE	CELL PHONE		
_____	_____	_____	_____		
MOTHER/GUARDIAN NAME			EMAIL ADDRESS		
_____			_____		
ADDRESS/APT #	CITY	STATE	ZIP	HOME PHONE	
_____	_____	_____	_____	_____	
OCCUPATION	EMPLOYER	WORK PHONE	CELL PHONE		
_____	_____	_____	_____		

CHILD LIVES WITH: BOTH PARENTS _____ MOTHER ONLY _____ FATHER ONLY _____ GRANDPARENT/GUARDIAN _____

WHO HAS LEGAL CUSTODY? _____ (Court Documents will be due upon registration)

SPECIAL CIRCUMSTANCES THE SCHOOL SHOULD BE AWARE OF? _____

NAMES AND AGES OF SIBLINGS ATTENDING LAMB OF GOD SCHOOL AND/OR PRESCHOOL:

PART 3 – CONTRACTUAL AGREEMENT

I, the undersigned, agree to fulfill all financial obligations and agree to adhere to the policies and regulations required by Lamb of God Lutheran Preschool as stated in the Preschool Family Handbook. I understand that enrollment is contingent on being current with registration paperwork, tuition and fees.

I understand that in the event of a withdrawal by a student, or dismissal from the school, the following shall be in effect:

1. All fees are non-refundable.
2. Tuition will be charged through the end of the month in which the student is enrolled (a student is enrolled until a formal withdrawal form is completed).

Father/Guardian Signature _____ Date _____
Print _____

Mother/Guardian Signature _____ Date _____
Print _____

Received Family Handbook _____ Date _____

Where did you hear about us? _____

Are you Military? Yes _____ No _____

Ethnicity: (please check one; statistical purposes only)

American Indian _____

Asian _____

Black _____

Hispanic _____

White _____

Other _____