Lutheran Church of Our Redeemer Preschool Registration Form

2001 2nd Street NW | Watertown, SD 57201 | Church Office Phone: (605) 886-2696

2024-2025 School Year

Please check the preferred class for which you are registering.
We will fill the morning class first and then open up an afternoon class.
{$50 Non-Refundable Registration Fee}

Cash _____   Check _____   Paid Date _____

☐ 4/5 Year Olds (by Sept. 1st) 8:30–11:30am M – Th

☐ 4/5 Year Olds (by Sept. 1st) 12:15–3:15pm M – Th

Student's Name (First, Middle, Last):	Nickname:	Gender:	Date of Birth (Mo/Day/Yr):
Street Address:	City:	State:	Zip Code:

Marital Status of Parents: Married   Separated   Divorced   Single Parent

Student lives with: Both Parents   Mother   Father   Guardian   Other

Legal Guardian Name(s):	Relationship to Student:	Home Phone:	Mobile Phone:
Street Address: *(if different than child)*	City:	State:	Zip Code:
Employer:	Occupation:	Work Phone:	E-Mail Address:

(Please fill out box (2) also, if marital status of parents is separated or divorced)

(2) Legal Guardian Name:	Relationship to Student:	Home Phone:	Mobile Phone:
Street Address: *(if different than child)*	City:	State:	Zip Code:
Employer:	Occupation:	Work Phone:	E-Mail Address:

Other Siblings:	Ages:	Church Affiliation/Home Church:	Tuition:
		Would you be willing to provide a nutritious snack for your child and other children in the class on a rotating basis? ☐ Yes ☐ No	**Tuition is $150 per month; due by the 10th.**
			Make checks payable to LCOOR.
		List any allergies or special needs:	**Class enrollment is limited.**

Any other information you would like to provide regarding your child's family, personality, needs, habits, custody arrangement, etc.: *(Use back of form if you need more room to write)*

I acknowledge and wish to enroll my child in the LCOOR Preschool. A $50 non-refundable Registration Fee MUST accompany this Registration Form. This Fee will serve as a guarantee for the student's class placement in Preschool. Make checks payable to LCOOR.

Parent's Signature: _____   Date: _____