

Prince of Peace Lutheran Preschool
2300 E.15th Street Casper, Wyoming 82609 (307) 265-7016

Summer School Registration Form
Cost is \$250 which includes a non-refundable \$20 Pre-Registration Fee

(Please Print)

Child's Name: _____ [] Male [] Female

Nickname: _____ **Date of Birth:** _____

\$20 Pre-Registration Fee Paid: Yes/No

Mother's Name: _____

Home Address: _____ Zip Code: _____

E-mail Address: _____ Primary Phone: _____

Place of Work: _____ Work Phone: _____

Father's Name: _____

Home Address: _____ Zip Code: _____

E-mail Address: _____ Primary Phone: _____

Place of Work: _____ Work Phone: _____

Child resides with: _____

Other Children in Family: Name: _____ Age: _____

Name: _____ Age: _____

Persons Authorized to Pick child up from preschool: _____ Mother _____ Father
_____ Other (Please print below)

Name Address Phone

Name Address Phone

Name Address Phone

Only written permission will permit us to release your child to any other person.

In Case of Emergency Contact (When parents can't be reached):

Name _____ Phone: _____

Name _____ Phone: _____

Child's Physician: _____ Phone: _____

Child's Dentist: _____ Phone: _____

Does your child have any food allergies? (Circle one) **YES No**

If yes, please explain: _____

An immunization form must be completed within 30 days of enrollment by your child's physician showing proof of current immunizations

Child's fears: _____

Child's dislikes: _____

Family's Religious Affiliation: _____

Other Pertinent Information: _____