

BETHEL LUTHERAN CHURCH PRESCHOOL

**5110 Grand Avenue, Gurnee, IL 60031
847-244-9672**

SCHOOL YEAR: 2011-2012		Today's Date:	
Child's Name (First/Middle/Last):		Nickname:	(Circle) M / F
Date of birth:	Home Phone:	Cell Phone(s):	
Current address:			
City:	State:	ZIP Code:	
Mother's Full Name:			
Father's Full Name:			
Bethel Church Member? (father, mother or child)		Yes _____	No _____
Home Church Name:		Location (city,state):	

CLASS PREFERENCE

I am interested in the following class for September, 2011, and **I understand that my child MUST be toilet trained in order to attend preschool**

- _____ **M/W/F** 9:00 – 11:30 am 4 yr. old class (child must be 4 by Sep. 1, 2011)
- _____ **Tu/TH** 9:00 – 11:30 am 4/5/6 yr. old Enrichment class (child must be 4 by Sep. 1, 2011)
- _____ **Tu/TH** 9:00 - 11:30 am 3 yr. old class (child must be 3 by Sep. 1, 2011)
- _____ **Tu/TH** 12:45 - 3:15 am 4/5/6 yr. old Enrichment class* (child must be 4 by Sep. 1, 2011)

THIS APPLICATION IS FOR THE 2011-2012 SCHOOL YEAR ONLY.

A \$50.00 non-refundable registration fee is due with this form. This fee is waived for Bethel Congregation members. This fee is also waived for a second child enrolled.

To be completed by Bethel Preschool Staff:

ENROLLMENT DATE _____ ENROLLED BY _____

\$ _____ DATE PAID _____ CHECK# _____

	M-W-F	9:00 – 11:30 A.M.	4 YEAR OLD CLASS
	Tu-TH	9:00 – 11:30 A.M.	4/5/6 YEAR OLD ENRICHMENT CLASS
	Tu-TH	9:00 – 11:30 A.M.	3 YEAR OLD CLASS
	Tu-TH	12:45 – 3:15 P.M.	4/5/6 YEAR OLD ENRICHMENT CLASS

DISCHARGE DATE _____