

# SUNBEAMS LUTHERAN SCHOOL REGISTRATION FORM

## Lutheran Church of the Cross

23810 112<sup>th</sup> Avenue SE

Kent, WA 98031-3545

(253) 854-3240

Fax: (253) 854-2721

### OFFICE USE

Class \_\_\_\_\_

Reg. Fee \_\_\_\_\_

Date Rec'd \_\_\_\_\_

Check # \_\_\_\_\_

**THIS APPLICATION PLACES THE STUDENT'S NAME ON OUR CURRENT WAITING LIST IN THE ORDER IN WHICH IT WAS RECEIVED.** Upon enrollment, parents will receive a Parent Handbook including guidelines, expectations and procedures. Children entering preschool must be at least 3 years old by August 31 of the enrolling year. Children enrolling in kindergarten should be 5 years old by August 31 of the enrolling year. Children enrolling in 1<sup>st</sup> grade should be 6 years old by August 31 of the enrolling year. Children enrolling in 2<sup>nd</sup> grade should be 7 years old by August 31 of the enrolling year. Children enrolling in 3<sup>rd</sup> grade should be 8 years old by August 31 of the enrolling year.

### CHILD INFORMATION

Child's Name \_\_\_\_\_ Name to be used in school \_\_\_\_\_  M or  F

Birthdate \_\_\_\_\_ Birthplace \_\_\_\_\_

Native Language spoken in the home \_\_\_\_\_ Country of origin \_\_\_\_\_

(A copy of child's Birth Certificate is required for Kindergarten students.)

### PARENT INFORMATION

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home phone # \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Cell Phone # \_\_\_\_\_

Father's Cell Phone # \_\_\_\_\_

Mother's Employer \_\_\_\_\_

Father's Employer \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Work Phone # \_\_\_\_\_

Work Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Email Address \_\_\_\_\_

Current Marital Status of child's parents \_\_\_\_\_

(If parents are divorced, a copy of the divorce decree must be made available so proper custody rights are administered by school personnel.)

Has there been a recent change in situation in the family pattern, such as divorce, illness, or new baby, which might affect your child?

If yes, explain \_\_\_\_\_

Other children in family

Age

Grade level in school

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### PLEASE CHECK DESIRED SCHEDULE

#### Morning Classes

- RED CLASS** Preschool - Tue/Thu, 9 a.m.-12 p.m.
- ORANGE CLASS** Pre-Kindergarten - 3 day or 5 day, 9 a.m.-12 p.m.
- BLUE CLASS** Pre-Kindergarten - 3 day, 9 a.m.-12 p.m.

#### Afternoon Classes

- GREEN CLASS** Multi-Age Preschool - Mon/Wed/Thu, 1-3:30 p.m.

#### Full Day Classes

- PURPLE CLASS** Kindergarten - Mon/Wed/Fri, 9 a.m.-2 p.m.
- PURPLE PLUS** Kindergarten Plus - M-F, 9 a.m.-2 p.m.
- YELLOW CLASS** 1<sup>st</sup> Grade - Mon-Thu, 9 a.m.-3:30 p.m.; Fri, 9 a.m.-2 p.m.
- LIME CLASS** 2<sup>nd</sup> Grade - Mon-Thu, 9 a.m.-3:30 p.m.; Fri, 9 a.m.-2 p.m.
- NAVY CLASS** 3<sup>rd</sup> Grade - Mon-Thu, 9 a.m.-3:30 p.m.; Fri, 9 a.m.-2 p.m.

### CHURCH AFFILIATION

Are you currently a member of a particular church?  Yes  No

Church Name/Address \_\_\_\_\_ Pastor's Name \_\_\_\_\_

Is student baptized?  Yes  No Where does child attend Sunday School? \_\_\_\_\_ Would you like Pastor or an outreach person from the church to call on you with more information about our church and its ministries?  Yes  No

Does your family have special needs that we should be aware of or can assist you with? Please list \_\_\_\_\_

\_\_\_\_\_

**HEALTH HISTORY**

Check any that apply:

- Premature birth                       Asthma                       Glasses                       Right handed                       Left handed  
 Food allergies    If yes, list \_\_\_\_\_  
 Other Allergies    If yes, list \_\_\_\_\_  
 Takes medications    If yes, what and how often? \_\_\_\_\_  
 Health concerns    If yes, explain. \_\_\_\_\_

**DIETARY NEEDS**

- Vegetarian                       Other, please explain \_\_\_\_\_  
 Gluten free

**PRESCHOOL/PRE-K QUESTIONS**

- Toilet Trained                       Attended school before, if yes, where? \_\_\_\_\_

**OTHER INFORMATION**

What would you like the teacher to know about your child? \_\_\_\_\_

Please identify characteristics that apply to your child such as separation anxiety, makes friends easily, fearful in new situations, or other characteristics you feel will help us in working with your child: \_\_\_\_\_

How do you discipline your child? \_\_\_\_\_

How did you hear about our program? \_\_\_\_\_

What do you feel will be the advantage of your child attending a Christian school? \_\_\_\_\_

***\*\*Lutheran Church of the Cross does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies or other school administered programs.\*\****

- Names, address, and phone numbers for our family may be included in a school directory     Yes     No
- Photographs of the student named on this registration form may be used in school projects, programs, school website, school Facebook account, and other promotional materials     Yes     No

A non-refundable registration fee must accompany registration form: \$90 for 2-3 day Preschool; \$110 for 5 day PreK; \$135 for 3 day Kindergarten; \$150 for 5 day Kindergarten, 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> Grade programs. The registration fee includes books, curriculum materials and a school t-shirt for each student. Please make checks payable to SUNBEAMS LUTHERAN SCHOOL.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Enrollment interview completed by Director. Enrollment approved by Director     Yes     No     Conditionally \_\_\_\_\_

Date \_\_\_\_\_

Director's Signature \_\_\_\_\_