

APPLICATION FOR ADMISSION TO ST. Paul LUTHERAN SCHOOL EXTENDED CARE PROGRAM

WHAT SESSION(S) DO YOU NEED?

___ MORNING 6:30 AM – 8:00 AM

___ EARLY DISMISSAL 12:00 PM – 3:30 PM

___ ½ DAY 12:00PM – 3:30 PM

___ AFTERNOON SESSION 3:30 PM – 6:30 PM

1. CHILD'S NAME: _____

BIRTHDAY: _____ BAPTISMAL DATE: _____

GRADE IN SCHOOL: _____ ALLERGIES: _____

2. CHILD'S NAME: _____

BIRTHDAY: _____ BAPTISMAL DATE: _____

GRADE IN SCHOOL: _____ ALLERGIES: _____

3. HOME ADDRESS: _____

4. HOME PHONE NUMBER: _____

5. FATHER'S NAME: _____

a. FATHER'S BIRTHDAY: _____ BAPTIZED? Y N

b. FATHER'S CELL NUMBER: _____

c. FATHER'S WORK NUMBER: _____

d. OCCUPATION: _____

e. FATHER'S EMAIL: _____

6. MOTHER'S NAME: _____

a. MOTHER'S BIRTHDAY: _____ BAPTIZED? Y N

b. MOTHER'S CELL NUMBER: _____

c. MOTHER'S WORK NUMBER: _____

d. OCCUPATION: _____

e. MOTHER'S EMAIL: _____

7. MARITAL STATUS: CIRCLE ONE: MARRIED SEPARATED DIVORCED WIDOWED SINGLE

8. CHURCH MEMBERSHIP: _____

9. NAME(S) AND PHONE NUMBER(S) OF PERSONS TO WHOM CHILD (REN) MAY BE RELEASED:

10. _____ HAS MY/OUR PERMISSION TO TAKE WALKING

FIELDTRIPS WITH LATCH KEY . _____

*All children attending Latch Key must have a current physical on file (or other document), a white card, and this form. There is a \$50.00 non-refundable registration fee per child for Latch Key.