



Timothy  
Lutheran  
Preschool  
Love Grows Here

## **2024-25 Enrollment Form**

### **Student Information**

Full Name: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Class Preference: \_\_\_\_\_

Address: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Allergies/Food Restrictions: \_\_\_\_\_

IEP/504/Speech/OT/Other: \_\_\_\_\_

### **Parent/Guardian Information**

Parent #1 Name: \_\_\_\_\_ Parent #2 Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Emergency Contact Name/Phone: \_\_\_\_\_

Child resides with: \_\_\_\_\_

Siblings and ages: \_\_\_\_\_

Previous School Experience and Child's Response: \_\_\_\_\_

Is your child toilet-trained? Yes \_\_\_\_\_ No \_\_\_\_\_

(students 3yrs and older must be able to use the toilet independently- see potty training guidelines)

Any medical or developmental concerns or issues? \_\_\_\_\_

Where did you hear about us? \_\_\_\_\_

Do you have a home church and, if so, where? \_\_\_\_\_

Any additional information you would like to share about your child?

\_\_\_\_\_

## **Parental Agreements**

1. I hereby grant permission for my child to use all play equipment and participate in all of the activities of the program.
2. I acknowledge that my child may be photographed or videotaped for public relations purposes only, with no associated names or personal information attached, and that those photos or videos may be used for printed or digital media for public relations purposes only.
3. I agree to read the Parent Handbook and will abide by the regulations unless otherwise noted.
4. I acknowledge under Georgia law there is no liability for an injury or death of an individual entering Timothy Lutheran Church if such injury or death results from the inherent risks of contracting COVID-19. I am assuming this risk for my family and my child when entering Timothy Lutheran Church.
5. I understand that Timothy Lutheran Church and/or school staff cannot be held responsible for accidents or injury that may occur on the property of the church.
6. I agree to provide any updated information as needed for this form as changes occur.
7. I understand that the registration fee is non-refundable, and I agree to pay the fees owed, understanding that any tuition of more than 30 days in arrears may result in program dismissal.
8. I understand that my child's photo may be shared on Timothy Lutheran Preschool's private Facebook school group and through Brightwheel. My child's name will not be shared or tagged. Please speak with the Director if you do not wish to have your child's photo shared.
9. I authorize Timothy Lutheran Church Early Childhood Education program to seek medical treatment for my child. I give permission to the emergency physician to secure proper medical treatment if I cannot be contacted. It is understood that a conscientious effort will be made to locate me, my spouse or an alternative emergency contact before action is taken. If we cannot contact you or your child's physician, we will attempt to call another physician, call 911 and/or have the child taken to an emergency hospital in the company of a staff member or representative of the church. In this case, accept the financial responsibility. In the event of a life-threatening emergency, I understand that '911' will be called to take my child to the closest available facility.
- 10. I will complete additional information and authorized pick-up information in the Brightwheel communication system prior to the first day of school.**

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

*Timothy Lutheran Church Preschool admits students of any race, color, gender, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, gender, national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic or other school administered programs.*

Office Use Only: Reg date \_\_\_\_\_ Reg fee \_\_\_\_\_ Curr fee \_\_\_\_\_ #3231 \_\_\_\_\_ Note \_\_\_\_\_