

St. John Lutheran Preschool

807 E. Main St.

Abingdon, VA 24210

Registration Form School Year 2023-24

Class 3's 4's 4/5 Pre-K (Circle one)

Child's Full Name _____

Name child prefers _____

Date of Birth _____

Address _____

City, Zip _____

Home Phone _____

Cell phone _____

Father's Name _____

Work phone _____

Mother's Name _____

Work phone _____

Email address _____

Does your child live with both mother and father? _____ If not, please explain:

Emergency contact (Other than parents, we will always try to reach parents first)

Name _____ Phone _____

Physician's Name _____ Phone _____

Insurance Co. and number _____

Known Allergies, medical concerns or medications _____

Any concerns the staff needs to be aware of _____

Child's brothers and sisters (names and ages) _____

Your home church _____

Enclosed is \$50.00 registration fee to secure your child's space in the class and purchases supplies for the upcoming school year.

I understand this fee is non-refundable.

_____ Date _____

Signature of parent/guardian