Splou growing	in God	s grac	e	In order to con return the comp and \$60.0		ication pro ned tuition ble registr Luther	ocess, please n agreement ration fee to: an School	
APPLYING FOR:			ay and Wedne -refundable re	• ·				
			ay, Tuesday, V -refundable re	Vednesday, Thu gistration fee	ırsday)			
Child'sName								
Nickname			_Birth Date	//	Gender	М	F	
Child'sAddress								
Mother's / Legal Gu	ardian'Na	ne						
Mother's Address (if	different)_							
Phone	CellEr			nail				
Employer's Name Ph	one#							
Father's / Legal Guardian's Name								
Father's Address (if o	lifferent)							
Phone	Cell Email							
Employer's Name &	Phone #							
Parent's Marital Statu What is the custody st	u.	,	married			ngle		
Emergency Contact Person								
Relation of c	contact to f	amily						

Known Allergies			
Is your child toilet trained?	YES	NO	
Briefly describe your child's perso	onality		
Please describe any concerns you	may have re	garding you	r child's development.
Are there any other specific conce	erns that the s	staff should	be made aware of?
(Circle one) (I give, I do not give	e) Little Spre	outs permiss	sion to publish photos of my child.
(Circle one) (I give, I do not give to be used in a directory.	ve) Little Spi	routs permis	ssion to publish my contact information
(Circle one) (I give, I do not mailings. Your email address will	0 /	1 1	ermission to use my email address for without your consent.
Do you have a church home?	YES	NO	
If yes, which church?			
Is your child baptized?	YES	NO	
Did anyone refer you to Little Spi	routs PreK?	YES	NO If yes, who?
Little Sprouts PreK is a program v	with spiritual	goals and ol	bjectives in addition to curriculum goals

Little Sprouts PreK is a program with spiritual goals and objectives in addition to curriculum goals and objectives. We understand, therefore, that your signature below affirms your support of our goals and purposes as a Christian school as they relate to the instruction of your child.

Signature of Parent / Legal Guardian