

**Christ Lutheran Preschool**  
760 Victoria Street  
Costa Mesa, CA 92627  
949.631.1639

**Preschool Re-enrollment Application**  
**School Year: 2010-2011**

Child's Name \_\_\_\_\_ Sex M\_\_\_F\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Please respond to the following questions so we are able to update your child's file:

1. Does your child take medication? \_\_\_\_\_

2. If yes, please explain: \_\_\_\_\_

3. Has your child had any serious illnesses, accidents, or operations in the last year?  
\_\_\_\_\_

4. Does your child have any allergies? \_\_\_\_\_

5. Are there any family issues that we need to be aware of so we may better serve your child's needs? \_\_\_\_\_

6. Are there any legal restrictions on visitation, custody or guardianship concerning your child? \_\_\_\_\_

7. Would you like a call from one of our Pastors regarding membership or a need that you may have? Yes\_\_\_\_\_No\_\_\_\_\_

To guarantee enrollment for my child for the 2010-2011 school year I understand the Application Form must be completed and returned with the registration fee and session request. I understand this is a **non-refundable** fee.

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Legal Guardian's Signature

\_\_\_\_\_  
Date

