



St. Peter Lutheran School

2440 North Raucholz Road
Hemlock, MI 48626
www.stpeterhemlock.org
989.642.5659

RE-ENROLLMENT FORM FOR PRESCHOOL

Child's Full Name	Age	Birth Date

Check One: _____ Preschool Only _____ Preschool and Child Care

Circle the days your child will attend Preschool: Monday Tuesday Wednesday Thursday Friday

Circle the days your child will attend Child Care: Monday Tuesday Wednesday Thursday Friday

A non-refundable application fee must accompany this form which will be applied to your account: \$100/family. All forms are due today in order to reserve a spot and to be able to choose days.

Signature

Date

Because of your child's involvement at school, his name or picture may appear in various publications: newsletters, website, newspapers, and other publications. If you do NOT want your child's name or picture included, please initial here: _____

For Office Use Only

Date Form Received: _____

Amount Paid \$ _____

Cash/Check # _____

Received by: _____