

# ST. PETER'S LUTHERAN

## PARENT AND TOT

### Registration Form – 2020-2021

Non-refundable \$25 Registration Fee \_\_\_\_\_ (due with this form)

\$100 for 30-32 sessions \_\_\_\_\_ (due by first class) *Please make checks payable to St. Peter's Lutheran*

Please Fill Out Completely

Name of Child \_\_\_\_\_  
*Last First MI male/female Date of birth*

Nickname of child (how you would like their name written) \_\_\_\_\_

Address \_\_\_\_\_

Home phone # \_\_\_\_\_ Mom's Cell \_\_\_\_\_ Dad's Cell \_\_\_\_\_

Email \_\_\_\_\_

Is the child baptized? Yes/No

Are you a member of a church? Yes/No

If applicable, what denomination? \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Name and relationship of person who will attend sessions with the child: \_\_\_\_\_

Emergency Contact Information:

Name: \_\_\_\_\_

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

Additional children living in the home:

<u>Name</u>	<u>Age</u>
_____	_____
_____	_____
_____	_____
_____	_____

Is English the primary language spoken at home? Yes/No

Are you vegetarian? Yes/No

Medical information/Allergies/Dietary Restrictions (You may list any developmental delays that affect(ed) your child and any medical issues or dietary restrictions that you want the staff to know about):

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How did you hear about us? \_\_\_\_\_ Flyer/Sign      \_\_\_\_\_ Friend (Name \_\_\_\_\_)

\_\_\_\_\_ Internet      \_\_\_\_\_ Other \_\_\_\_\_