



# Christ Lutheran School

*caring ... excelling ... growing in Christ*

Dear Parents,

Looking for a preschool for your three or four-year old can be a difficult task. At Christ Lutheran your child will benefit from learning in a caring Christian environment. Our mission is to partner with you to develop the God-given abilities in your child so he/she can grow in knowledge of the Lord Jesus Christ and live as effective citizens in his kingdom. This is done in a developmentally appropriate atmosphere where we prepare the children spiritually, physically, emotionally, socially, intellectually, and creatively.

Our preschool has had the privilege of working with children for over 30 years. Our teachers are certified by the Nebraska Department of Education. Mrs. Moje, one of our teachers and preschool director, received her Lutheran teaching degree from Concordia University, Seward, NE. We believe that she is the only early childhood teacher with a master's degree in early childhood in the city of Norfolk.

Christ Lutheran School offers a half-day program five days a week for children who are 4 by July 31, 2019. A half-day program three days a week and a half-day program two days a week are offered for children who are 3 or 4 by July 31, 2019. All morning programs are in session from 8:00–11:00 am and all afternoon programs are in session from 12:25–3:25 pm.

Please use the enclosed enrollment form to register. This completed form and a non-refundable registration fee of \$35.00 holds a place for your child. Please keep in mind that all applications will be taken on a first-come-first-served basis due to limited class sizes.

If you would like more information about our preschool program, please feel free to contact us at (402) 371-5536 and speak to one of the teachers. We would also invite you to set up a time for you to visit so that you can see our quality program first hand.

**We are excited to partner with Helping Hands Child Care located on our campus.** They accept children from 6 weeks through 12 years old. This will provide you a place where children may be cared for before and/or after school. You may contact Chad Bryant, the director, at 402-379-3275 or email [cbryant@clnorfolkmail.org](mailto:cbryant@clnorfolkmail.org).

Fishing for the One,  
Steven Stortz  
Principal, Christ Lutheran School

*Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these. (Matthew 19:14)*



**Child Information**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Birth Date \_\_\_\_\_ Gender \_\_\_\_\_ Name Child Goes By/For Nametag \_\_\_\_\_  
Day-month-year

Please mark the appropriate boxes:

Ethnicity: Is the student Hispanic or Latino?  YES  NO

Race:  Caucasian  African American  Asian  American Indian

**Parent/Guardian Information**

**Father/Guardian** (circle one)

**Mother/Guardian** (circle one)

Name \_\_\_\_\_

Name \_\_\_\_\_

Address (if different) \_\_\_\_\_

Address (if different) \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Work Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Marital Status: (circle those that apply)

Marital Status: (circle those that apply)

Married Single Separated Divorced Other \_\_\_\_\_

Married Single Separated Divorced Other \_\_\_\_\_

**Emergency Contact Information** (in case a parent cannot be reached)

Name (other than parent) \_\_\_\_\_

Doctor \_\_\_\_\_

Relationship \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

**Religious Background Information**

Does your child have an awareness of God?  Yes  No

Is your child baptized?  Yes  No

Does your child attend: Sunday School?  Yes  No

Church?  Yes  No

Of which Congregation are you a member? \_\_\_\_\_

## Family Information

List names & ages of siblings \_\_\_\_\_

List names of other adults in home \_\_\_\_\_

How should parent names appear in the CLS phonebook? \_\_\_\_\_

## Additional Information

Who cares for child during the day? (circle one)

Parent   Helping Hands Child Care   Other (name & phone) \_\_\_\_\_

Provide names of those transporting child to and from school. (Include phone if other than parent or guardian.)

Drop Off \_\_\_\_\_

Pick Up \_\_\_\_\_

Does your child take naps?  Yes  No                      Age of child when starting Preschool \_\_\_\_\_

Does your child have bladder and bowel control?  Yes  No    Problems? \_\_\_\_\_

\*Child may have occasional accidents, but must be able to attend to own bathroom needs before attending preschool.

Please use this space to describe any allergies or medical problems and to give additional information that would be helpful to the teacher (ie. fears, family situations, special concerns, etc.).

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How did you hear about Christ Lutheran Preschool? \_\_\_\_\_

## Registration Information

\*A **\$35 non-refundable registration fee** (payable to Christ Lutheran School) is required with this form.

\*New students only – A copy of your child's **updated immunization record** and **certified birth certificate** (from Department of Health & Human Services) must be provided prior to the start of school.

Parent Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

\*Please note that by signing this form, you are indicating your responsibility for tuition and fees. Inform the office of any special circumstances when submitting this form.

Indicate your **1<sup>st</sup>** and **2<sup>nd</sup>** choice from the following sessions:

Must be at least 4 by July 31 _____ 5 Day A.M.	Must be at least 3 by July 31 _____ 3 Day A.M.	Must be at least 3 by July 31 _____ 2 Day A.M.
_____ 5 Day P.M.	_____ 3 Day P.M.	

* * For Office Use * *
Date App Received _____
Date of Termination _____
Reason _____
Reg Fee Check # _____ Cash _____
Birth Cert. _____ Imm. Rec. _____

\*If your child does not nap, please consider an afternoon class if possible.