



# HOPE LUTHERAN CHURCH & SCHOOL

## Hope Lutheran Pre-School

5218 Neosho  
St. Louis, MO 63109

### APPLICATION FOR ENROLLMENT

Please remember, students need to be three or four by September 1<sup>st</sup>. This application must be accompanied by your \$60 non-refundable registration/activity fee payable to Hope Lutheran School.

Student \_\_\_\_\_ Boy \_\_\_\_ Girl \_\_\_\_  
Last name First

Address \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Baptized? \_\_\_\_\_ Date of Baptism \_\_\_\_\_ Where \_\_\_\_\_

My family attends \_\_\_\_\_ Church. E-mail address \_\_\_\_\_

#### Parent Information

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

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

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

Place of employment \_\_\_\_\_ Work Phone \_\_\_\_\_

#### Medical Information

**In order for your child to begin attending, we must have a copy of his or her birth certificate and an up-to-date immunization record.**

Please list additional persons we may contact in case of emergency:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Hope Lutheran School admits students of any race, color, national or ethnic origin and entitles them to all the rights, privileges, programs, and activities generally accorded to students of the school. It does not discriminate on the basis of race, color, national or ethnic origin.

Signature of Parent or Guardian \_\_\_\_\_ Date of application \_\_\_\_\_