



Application Form

CHILD INFORMATION

Child's Full Name _____

Other name the Child goes by _____

Birth Date _____ Gender _____

Address _____

_____ Primary Phone _____

Any Known Special Needs?

PARENT/GUARDIAN INFORMATION

Parent Name _____ Cell Phone _____

Address _____

Occupation _____

Employer _____ Work Phone _____

Parent Name _____ Cell Phone _____

Address _____

Occupation _____

Employer _____ Work Phone _____

How did you hear about Lakeside Christian Preschool?

Sign _____ Internet _____ Friend _____

Lakeside Christian Preschool Requirements

- Completed Application
- \$50 Registration Fee
- 3 y.o. Birthday on/before 09/01/2023 or 4 y.o. Birthday on/before 09/01/2023
- Child must be potty-trained

**Return this application to:
Shelley Kuchar 225 Toronto Road Springfield, IL 62711**