



# REGISTRATION FORM

Preschool & Pre-kindergarten

2026-2027 School Year

## Immanuel Lutheran School

4656 State Hwy. 200 NW, Walker, MN 56484 • immanuellutheranwalker.com • immanuellutheranschoolwalker@gmail.com

Child's Name \_\_\_\_\_ Nickname \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Birth date \_\_\_\_\_ Baptized? \_\_\_\_\_ Baptism Date \_\_\_\_\_

Child primarily resides with: (check one) \_\_both parents \_\_Mother \_\_Father

Other children in the family: (please list name/birthdate/grade if applicable)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Father's name \_\_\_\_\_ Mother's name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

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

Cellular Phone \_\_\_\_\_ Cellular Phone \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

Best way to reach me \_\_\_\_\_ Best way to reach me \_\_\_\_\_

Father's Church \_\_\_\_\_ Mother's Church \_\_\_\_\_

Child attends: \_\_\_\_\_ Sunday School \_\_\_\_\_ Worship at \_\_\_\_\_

If not members of Immanuel Lutheran Church, are you interested in membership? \_\_\_\_\_ Mother \_\_\_\_\_ Father

Special needs and information \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### CLASS MY CHILD WILL BE ENTERING

**Preschool (2 Half-days)**

3 years old (by Sept. 1st)  
Mon. & Wed., 8:30-11:30 a.m

**Pre-kindergarten (2 Days)**

4 years old (by Sept. 1st)  
Tues. & Thurs. 8:30-3 p.m

**Pre-kindergarten (2 Days)**

4 years old (by Sept. 1st)  
Tues. & Friday 8:30-3 p.m

**Pre-kindergarten (3 Days)**

4 years old (by Sept. 1st)  
Tues., Thurs., & Friday, 8:30-3

### FEES ENCLOSED

\$25 Registration fee  
(due with registration form)

\$25 Supply (preschool)

\$35 Supply (pre-kindergarten)

\$100 Snack (preschool)

\$150 Snack (pre-k 2 DAYS)

\$225 Snack (pre-k 3 DAYS)