

**Our Savior's Lutheran Church**  
**Mommy and Me Program Registration Form**  
**Fall Session - 13 Weeks**

**Child must be 2 years of age by September 1, 2019**

**Mondays - 9/9/19 - 12/16/19 | Thursdays - 9/12/19 - 12/19/19**

Today's Date: \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_

1. My Child will attend Monday Class \_\_\_\_\_ My Child will attend Thursday Class \_\_\_\_\_

2. Parent's Name: \_\_\_\_\_

3. Child's First Name: \_\_\_\_\_ Child's Last Name: \_\_\_\_\_

4. Child's Preferred Name to be used: \_\_\_\_\_

5. Date of Birth: \_\_\_\_\_ Child's Age: \_\_\_\_\_ (must be 2 yrs by 9/1/19 to attend)

6. Address: \_\_\_\_\_

7. City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

8. Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

9. Parent e-mail: \_\_\_\_\_

Cost: \$270.00 per student.

Check or Cash - Please make your check payable to:

Our Savior's Lutheran Church

There is a \$10.00 material fee due the first day of class.

(Please don't include material fee with tuition payment)

Please fill out form and return with your pmt to the church/school office or mail to:

**Our Savior's Lutheran Church**  
**200 Avenida San Pablo**  
**San Clemente, CA 92672**  
**(949) 492-6165**  
**oslcsec@sbcglobal.net**

For office use only:

Tuition Pd \_\_\_\_\_ Date Pd \_\_\_\_\_ Ck # \_\_\_\_\_ Cash \_\_\_\_\_

Start Date \_\_\_\_\_ Drop Date \_\_\_\_\_

Copy to Patti \_\_\_\_\_ Copy to Joan \_\_\_\_\_