2026 Trinity Lutheran Nursery School

Summer Session at Trinity
June 1 to to June 22

Tuesday, Wednesday & Thursday mornings

9 to 11:30 $95.00 a week

2 mornings 9 to 11:30 $ 90.00 a week
NO EARLY MORNING DROP OFF

Lunch Bunchers until 1:30 ($15.00 a day)

Registration
Name_____ **Age**_____
Address_____**Cell Phone**_____
_____ _____**e mail address**_____
Phone_____
Class presently attending_____
Allergies_____
Food Sensitivities_____
Pediatrician_____Phone_____
In case of emergency:
Name_____Phone_____
Name_____ Phone_____



I give permission for my child_____to receive EMT _____(signature)

Please circle the weeks you are interested in participating and on the line next to the week fill in the number of days...2 or.3
Please complete and return to school with the registration fee of $40.00 before April 1st.

Weeks participating_____ Amount due_____

Please return the form to school before April 1st with a $40.00 registration fee
June 1..... "Dinosaurs"_____
June 8..... "Oceans"_____
June.15....."Arcade"_____
June 22... "Safari"_____

Photo release:
Permission for my child,_____to have their picture taken for publication on the church's web site, school's facebook page and the local paper
___Yes, I give my permission
___No, I do not give my permission

Trinity Lutheran Nursery School & Mothers' Morning Out

Child's Name_____

Class_____

Emergency Contact information:

In the order of notification

Name	**Relation**	**Phone number**
1._____	_____	_____
2._____	_____	_____
3._____	_____	_____

People Permitted to pick up your child from school:

Name	**Relation**	**Phone**
1._____	_____	_____
2._____	_____	_____
3._____	_____	_____
4._____	_____	_____

Allergies:_____

Food Sensitivities_____

Does your child have asthma? yes or no

Does your child have an inhaler ? Yes or no **Does your child have an epi pen? yes or no**

e mail address_____

Please attach photo