



ST. LUKE'S PRESCHOOL

1701 West Old Shakopee Road, Bloomington, MN 55431
 (952) 881-5801, ext. 108 Email: preschool@stlukesbloomington.org
 Web: www.stlukesbloomington.org/preschool

PRESCHOOL APPLICATION FORM 2026 - 2027

ALL CHILDREN MUST BE TOILET TRAINED!

Child's Name _____ Birthdate _____

Name preferred (for labeling items) _____ Boy or Girl _____

Address _____ Zip Code _____
(Street/City)

Emails _____

Mother's Name _____ Occupation _____

Mother's Employer _____ Cell/Work # _____

Father's Name _____ Occupation _____

Father's Employer _____ Cell/Work # _____

Others in home (Names, ages & relationship. If former students, please list years attended)

Church Family Attends _____

Previous Preschool/Group Experiences _____

Special Physical/Emotional/Medical Needs _____

Class Choice	Number of Days/Week	Yearly Tuition*	Monthly Tuition*
	2 Days (9-12)	\$2250	\$250
	3 Days (9-12)	\$2700	\$300
	4 Days (9-12)	\$3150	\$350
	5 Days (9-12)	\$3420	\$380

*Yearly Tuition is broken down by the 9 months of school to create the Monthly Tuition due. Monthly rate will remain the same, regardless of the number of days in school each month.

Days Preferred:

(Please circle days requested)

Monday Tuesday Wednesday Thursday Friday

I wish to make an application to enroll my child in St. Luke's Christian Preschool. Enclosed is a check for \$70 for the registration fee. This Registration Fee is Non Refundable..

PARENT SIGNATURE _____ Date _____

Please make checks payable to St. Luke's Preschool

OFFICE USE ONLY

Date Received:	Check #	\$ Amount	Staff Initials