

# Lighthouse Enrollment Application

Child's Name \_\_\_\_\_ Gender \_\_\_\_ Age \_\_\_\_ Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell/Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Church of Attendance \_\_\_\_\_

Allergies/Special Concerns \_\_\_\_\_

Parent Signature & Date \_\_\_\_\_

[www.mcclighthouse.org](http://www.mcclighthouse.org)

**2017~2018**

913 Floyd Avenue  
Modesto, CA 95350  
(209) 557-0458

Number Class  
In Order of Preference:  
PRESCHOOL (3 YEAR OLDS)

M <sup>AND</sup> W

T <sup>AND</sup> Th

PRE-KINDERGARTEN (4 YEAR OLDS)

Large Class

M, W <sup>AND</sup> F

T <sup>AND</sup> Th

Small Class

M, W <sup>AND</sup> F

T <sup>AND</sup> Th