



Preschool Power Hour Registration Form

Parent's Name: _____

Parent's Address: _____

Phone Number: _____ Email Address: _____

Who will be bringing the child(ren) to Preschool Power Hour?

Address and telephone if different than parents: _____

Names and dates of birth of all children 0-4 yrs. who will be attending PPH (please include infant siblings)

Name: _____ DOB: _____ Allergies: _____

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How did you hear about our program?

Facebook _____ Friend _____ Brochure _____ Other (specify) _____

Are you currently a member of a church? Yes No

Name of Church: _____

We periodically use pictures from Power Hour on our website, in brochures, and on Facebook. Please sign here to give St. Matthew's permission to use photographs of you and your child.

Signature: _____ Date: _____

Mail registration to:
St. Matthew's Lutheran Church
Attn. Julie Nehr
1650 Brown St.
Oconomowoc, WI 53066
Or
Email to bpplitzuweit@smls.org