

Entrance Date \_\_\_\_\_  
 Child Cr FT \_\_\_\_\_ Hrly \_\_\_\_\_ No \_\_\_\_\_  
 Transportation: Yes \_\_\_\_\_ No \_\_\_\_\_  
 Birth Cert \_\_\_\_\_ Physical \_\_\_\_\_  
 Immunization \_\_\_\_\_  
 Interview: \_\_\_\_\_ W/D: \_\_\_\_\_



Registration Fee	_____
Testing Fee	_____
Activity/Books/Materials	_____
Tuition	_____
Transportation	_____
Child Care	_____

### Grade Level Placement

\*Child's Name \_\_\_\_\_ Nickname \_\_\_\_\_  
last first middle

Child's Home Address: \_\_\_\_\_

# and street name	city	state	zip

Home Phone Number \_\_\_\_\_ Birth Date: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Male/Female School Attended 22/23 \_\_\_\_\_

\* Father's Name \_\_\_\_\_ Title/Rank \_\_\_\_\_

Father's Home Address: \_\_\_\_\_

# and street name	city	state	zip

Father's Employer: \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Work Address: \_\_\_\_\_

# and street name	city	state	zip

E-mail: \_\_\_\_\_ ☐ Primary Contact

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ **\*Please circle primary phone number**

Occupation \_\_\_\_\_

\* Mother's Name \_\_\_\_\_ Title/Rank \_\_\_\_\_

Mother's Home Address: \_\_\_\_\_

# and street name	city	state	zip

Mother's Employer: \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Work Address: \_\_\_\_\_

# and street name	city	state	zip

E-mail:  ☐ Primary Contact

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ **\*Please circle primary phone number**

Occupation \_\_\_\_\_

Please circle one: 1) Married      2) Divorced      3) Separated      4) Single      5) Widow(er)

Parent/Guardian with Legal Custody

Church/Denominational Preference \_\_\_\_\_ Church Membership \_\_\_\_\_

Ages of Brothers \_\_\_\_\_ Ages of Sisters \_\_\_\_\_

I hereby make application for the attendance of my child in Gloria Dei Lutheran School. I understand that the Registration Fee is to accompany this application and is **not refundable**. The Activity/Book Rental and Materials Fee is due June 5, 2023, and is also **not refundable**.

I have read and understand the fee payment schedule. I realize that upon registration of my child, I am obligated to pay full tuition and fees from the date of admission to the end of the school year unless the school elects to release me from such obligation. Proof of civilian or military transfer will constitute a release of this obligation.

(over)



Fees are due by the 15th of each month and are considered delinquent if not received by 5:00 p.m. on the 20th of each month or the last working day prior to the 20th. A \$10.00 late fee per child will be assessed on payments received after the 20th of the month. Payments not received by the end of the month will result in my child not being able to return to school until the account is current. **Payments may be made by check, cashier's check, or money order. (NO CASH)**

Child care ends at 6:00 p.m. If a child is picked up at 6:01 p.m. from child care, the student's account will be charged an automatic \$15.00 late fee and then \$10 for each 5 minutes thereafter. (Ex: 6:10p.m. = \$35.00). I understand that Gloria Dei Lutheran School will assess a \$35.00 service charge on all returned checks. Accounts turned over for collection will be assessed legal fees and interest per state law.

There will be no pro-rating of child care or school tuition due to sickness, holidays, vacations, absences, withdrawals, or inclement weather.

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**Parent/Guardian**

**Date**

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**Parent/Guardian**

**Date**

**MEDICAL REQUIREMENTS:** All students new to Gloria Dei Lutheran School **MUST** have a ***current physical form, immunization record, and birth certificate on file*** prior to the first day of school.

Students entering kindergarten and sixth grade **MUST** have an updated immunization report on file no later than August 11, 2023.

**ADDITIONAL INFORMATION:** NOTE: If you have legal custody of this child, a copy of the Court Order must be filed in the child's school record to protect the school when refusing to release the child to a parent.

As per the court order on file, the following person(s) are **NOT** authorized to pick up this child:

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Does your child have any medication, food or environmental allergies, or pre-existing medical conditions? If so, please list

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Actions to take in an emergency \_\_\_\_\_

Unusual habits, fears or attachments? \_\_\_\_\_

**FIELD TRIP CONSENT:** We require that you give your consent for your child to accompany his/her class on all field trips during the school year. Detailed information regarding each outing will be sent home with your child prior to every field trip. We reserve the right to limit and withdraw field trip privileges if a child is having behavior or discipline problems.

Signature \_\_\_\_\_

**STUDENT DIRECTORY:** Gloria Dei Lutheran School will compile a class roster, which may be helpful to you during the year. Are you willing for the following to be included on the roster, which will be sent home with your child's classmates?

Address: Yes \_\_\_\_\_ No \_\_\_\_\_

Telephone Number: Yes \_\_\_\_\_ No \_\_\_\_\_

**MINOR INJURY REPORT:** "I understand that in case of a minor injury to my child, I will be notified in writing, by a note placed in my child's bookbag."



Signature \_\_\_\_\_

**STUDENT MEDIA INCLUSION:** In an effort to promote Gloria Dei Lutheran School, its students and its programs, student photos, class photos, candid shots, video, and the like, may appear on the school's official Web Site, Social Media - Facebook, Twitter, etc., the individual teacher's web page link, and/or school brochures, post cards, etc. This will be done with the review of the School's Head of School.

**PARENTS' RESPONSIBILITIES:** The parent must notify Gloria Dei Lutheran School, in writing, if their child will be withdrawn from the school program.

Gloria Dei Lutheran School and Child Care reserves the right to withdraw any child from the program if it is deemed necessary for the welfare of the child or the program.

**Signature** \_\_\_\_\_

A copy of the completed registration is available upon request. Initial \_\_\_\_\_

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Date

Rev. 2/23