

FAMILY INFORMATION

DATE _____

Parents: _____ / _____ / _____
Last Name Father First Name Mother First Name

Address: _____ Home Phone: () _____
Street City Zip

Home Congregation: _____

Parents are: Single Married Widowed Separated Divorced (circle one)

Father/Mother/Other (circle one if this applies) has been awarded, by the court, sole custody of the child(ren) for whom this application is being made. YES NO

Address of non-custodial parent: _____

Phone: () _____

Father's Employer: _____ Mother's Employer: _____

Occupation: _____ Occupation: _____

Work Phone: () _____ Ext: _____ Work Phone: () _____ Ext: _____

Cell Phone: () _____ Cell Phone: () _____

Email: _____ Email: _____

Student(s) being enrolled:

① Child's Name: _____ Goes by: _____
First Middle Last

Male/Female **Date of Birth:** _____ **Entering Grade 2009-2010:** _____
(Circle one)

Social Security Number: _____ Date of Baptism/Dedication: _____

② Child's Name: _____ Goes by: _____
First Middle Last

Male/Female **Date of Birth:** _____ **Entering Grade 2009-2010:** _____
(Circle one)

Social Security Number: _____ Date of Baptism/Dedication: _____

③ Child's Name: _____ Goes by: _____
First Middle Last

Male/Female **Date of Birth:** _____ **Entering Grade 2009-2010:** _____
(Circle one)

Social Security Number: _____ Date of Baptism/Dedication: _____

④ Child's Name: _____ Goes by: _____
First Middle Last

Male/Female **Date of Birth:** _____ **Entering Grade 2009-2010:** _____
(Circle one)

Social Security Number: _____ Date of Baptism/Dedication: _____

Please use a second application for additional children.

PLEASE COMPLETE OTHER SIDE →

EMERGENCY CONTACT INFORMATION: Please give two names with phone numbers (other than the parents) to use in case of an emergency.

Name: _____ Phone: () _____ Relation to child: _____

This person may pick up child(ren) _____ Yes _____ No

Name: _____ Phone: () _____ Relation to child: _____

This person may pick up child(ren) _____ Yes _____ No

Any medical conditions we should be aware of?

ENROLLMENT FEE POLICY: A \$100.00 PER FAMILY NON-REFUNDABLE ENROLLMENT FEE MUST ACCOMPANY THIS FORM. This money will be applied to your Tuition for 2009-2010.

MY PLEDGE AS A ST. JOHN SCHOOL PARENT

St. John Lutheran School, Glendale, Wisconsin, 2009-2010

Family Name: _____

HELPING YOUR CHILD GET THE MOST OUT OF A LUTHERAN EDUCATION

As Lutheran educators, the faculty of St. John's is convinced all children need:

- A. *Christian Education based on God's Word; which leads toward a Christian life of serving God in church, community, and country; and involves the whole person (spiritual, mental, physical, social emotional).*
- B. *An education in secular areas, taught in the light of God's Word, will and design.*
- C. *Daily Christian peer-fellowship and school activities experienced in a Christ-centered environment, directed by Christian teachers.*

As Parents of a St. John's student, We Pledge:

- A. *To pray for our child and all involved in his/her education;*
- B. *To provide a Christian atmosphere in our home, which is the most vital influence on our child's life.*
- C. *To attend church and Bible Class/Sunday School regularly, in keeping with my Lord's directive in the Third Commandment.*
- D. *To contribute financially to our place of worship, regularly and sacrificially, keeping in mind the manner in which the Lord has blessed us.*
- E. *To encourage and admonish our child(ren) to obey teachers and the school's rules cheerfully and promptly.*
- F. *To cooperate with and uphold the teachers in the exercise of Christian discipline and in the training of our child (ren), and to go directly to the teacher in a Christian manner if questions or concerns arise. (see Matt. 18:15).*
- G. *To take an active role in seeing that our child's assigned homework is completed, and to provide a place and opportunity for completing the task.*
- H. *To take into account our child's extra-curricular involvement and to encourage completion of these commitments.*
- I. *To fulfill the volunteer time obligation of 4 hours per semester in support of St. John's Lutheran School and its staff.*
- J. *To fulfill our financial obligation to St. John's Lutheran School in a timely manner. By executing this document, the parent/guardian agrees to be contractually obligated for all tuition and costs in connection with their child's enrollment.*

With the grace and help of God, I understand and fully accept the covenant that I am making this day and pledge to honor the commitments as stated above.

Signature: _____ Date: _____

Signature: _____ Date: _____

PHOTO RELEASE FOR 2009-2010 SCHOOL YEAR

I hereby grant St. John's Lutheran School, or anyone they may designate, full permission to use and reproduce, for any legal purpose in conjunction with the school's explanatory or fund raising material, or in the school and church newsletters, any and all photographs or slides taken during the current school year, in which my child (ren), herewith named on the first page of this form, may appear.

I hereby waive any and all future claims of compensation for their use.

Parent/Guardian Signature: _____ Date: _____

FIELD TRIP PERMISSION FOR 2009-2010 SCHOOL YEAR

I hereby give permission for my child(ren) to participate in school sponsored field trips during the 2009-2010 school year. I understand that I will be notified, in advance about each outing with specific details for each field trip and the costs (if any).

Parent/Guardian Signature: _____ Date: _____