



# STUDENT REGISTRATION FORM

GRACE LUTHERAN SCHOOL | 1212 W. JEFFERSON | BRENHAM, TEXAS 77833  
TEL (979) 836-2030

OFFICE USE ONLY

ADMISSION DATE

## STUDENT INFORMATION

NAME		ENTERING GRADE			
ADDRESS					
CITY		STATE	ZIP		
DATE OF BIRTH		SOCIAL SECURITY #			
GENDER	MALE	FEMALE	HOME PHONE		
BAPTIZED	YES	NO	BAPTISM DATE		
CHURCH MEMBERSHIP			ADOPTED	YES	NO

## PARENTAL INFORMATION

FATHER'S NAME	
COMPANY NAME	OCCUPATION
WORK PHONE	CELL PHONE
EMAIL ADDRESS	

MOTHER'S NAME	
COMPANY NAME	OCCUPATION
WORK PHONE	CELL PHONE
EMAIL ADDRESS	

PARENTAL STATUS    MARRIED    WIDOWED    DIVORCED    SINGLE

## EMERGENCY INFORMATION (OTHER THAN PARENT OR GUARDIAN)

NAME		RELATIONSHIP TO STUDENT	
ADDRESS			
HOME PHONE	WORK PHONE	CELL PHONE	
FAMILY DOCTOR	PHONE		
ADDRESS			

DOES YOUR CHILD HAVE A PHYSICAL DISABILITY OR PROBLEM OF WHICH THE TEACHER SHOULD BE AWARE?  
(e.g. ASTHMA, HEARING, SIGHTLIMITATIONS, OR SPECIAL MEDICATIONS REQUIRED)

IN THE EVENT THAT EITHER I NOR THE PERSON DESIGNATED TO BE CALLED IN CASE OF AN EMERGENCY CAN BE REACHED TO MAKE ARRANGEMENTS FOR EMERGENCY MEDICAL CARE AT THE TIME OF ILLNESS OR ACCIDENT, I HEREBY GIVE MY PERMISSION FOR AUTHORIZED SCHOOL PERSONNEL TO CONTACT MY FAMILY DOCTOR OR ANOTHER DOCTOR IF MY DOCTOR CANNOT BE REACHED. I ALSO AUTHORIZE SCHOOL PERSONNEL TO TRANSPORT MY CHILD TO THE DOCTOR'S OFFICE OR HOSPITAL OR CALL AN AMBULANCE IF NECESSARY. I DO HEREBY RELEASE GRACE LUTHERAN SCHOOL FROM ANY AND ALL CLAIMS OF LIABILITIES OF WHAT EVER NATURE, INDIVIDUALLY OR COLLECTIVELY, THAT MIGHT RISE FROM THE NORMAL OPERATIONS WITHIN THE SCHOOL, INCLUDING OFF CAMPUS AND EXTENDED DAY CARE SCHOOL SPONSORED ACTIVITIES.

PARENT'S SIGNATURE

DATE



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### PARENTAL DUTIES & DIRECTIVE

PLEASE ENROLL MY CHILD AT GRACE LUTHERAN SCHOOL IN THE GRADE STATED ABOVE.

AS PARENTS INTERESTED IN THE CHRISTIAN EDUCATION OF MY CHILD, IT IS MY SINCERE PROMISE, WITH THE HELP OF GOD, TO ADHERE TO THE FOLLOWING.

- A. I WILL ABIDE BY THE POLICIES AND GUIDELINES AS PRINTED IN THE SCHOOL HANDBOOK.
- B. I WILL INSURE THAT MY CHILD ATTENDS SCHOOL REGULARLY AND GETS TO SCHOOL ON TIME.
- C. I WILL HELP INSURE THAT MY CHILD PERFORMS ALL ASSIGNMENTS FAITHFULLY AND COMPLIES WITH THE DISCIPLINE AND POLICIES OF GRACE LUTHERAN SCHOOL.
- D. I WILL COOPERATE WITH AND ASSIST IN THE SPIRITUAL TRAINING OF MY CHILD BY BRINGING HIM/HER TO SUNDAY SCHOOL AND WORSHIP SERVICE WITH ME ON A REGULAR BASIS.

I, THE UNDERSIGNED, ALSO AGREE TO FULFILL ALL FINANCIAL OBLIGATIONS INCURRED AS A RESULT OF MY CHILD'S ATTENDANCE AT GRACE LUTHERAN SCHOOL.

IN REGARDS TO THESE FINANCIAL OBLIGATIONS, I UNDERSTAND THE FOLLOWING:

- A. TUITION AND DAY CARE MUST BE PAID IN A TIMELY MANNER.
- B. TUITION IN ARREARS MAY BE ASSESSED A SERVICE CHARGE UNTIL PAID IN FULL.
- C. ENROLLMENT AND ATTENDANCE IS CONTINGENT UPON PAYMENTS BEING MADE ON TIME AND ALL FINANCIAL OBLIGATIONS KEPT CURRENT.
- D. ALL FINANCIAL OBLIGATIONS MUST BE MET BEFORE REPORT CARDS, DIPLOMAS, OR TRANSCRIPTS WILL BE ISSUED.
- E. IN THE EVENT OF STUDENT WITHDRAWAL OR DISMISSAL,
  - FEES WILL NOT BE REFUNDED,
  - TUITION WILL BE CHARGED THROUGH THE END OF THE MONTH ENROLLED,
  - TUITION , FEES AND ALL OTHER CHARGES INCURRED PRIOR TO WITHDRAWAL OR DISMISSAL MUST BE PAID IN FULL BEFORE ANY OFFICIAL RECORDS OR TRANSCRIPTS ARE ISSUED.
  - UNCOLLECTED TUITION, FEES AND CHARGES PLUS COLLECTION FEES WILL BE SUBMITTED FOR COLLECTION.

PARENT'S SIGNATURE

DATE