

Holy Ghost Lutheran School
Registration Form
2018 - 2019

Parents/Guardians _____ Phone _____

Address _____ City _____ Zip _____

Email #1 _____ Email #2 _____

In cases of divorce with shared custody, please provide information for that parent as well:

Parents/Guardians _____ Phone _____

Address _____ City _____ Zip _____

Email #1 _____ Email #2 _____

Church you are a member of: _____

Child's Name Registering (Indicate last name if different from parents)	Grade (going into)	Birth date	Place of Birth (City & State)	Baptized (Y or N) (if yes, Church name & date/year)
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1. _____

2. _____

3. _____

4. _____

Emergency Agreement

I (we) grant permission for authorized school personnel to take whatever steps necessary to obtain medical care if warranted. These steps may include, but are not limited to: 1) attempt to contact parents or other authorized contact persons, 2) attempt to contact child's physician. If the school is unable to contact you or your physician, the school may do any of the following: 1) call 911, 2) call an ambulance, 3) call another physician. All expenses are the responsibility of the child's family. Your child's insurance information must be kept up to date. It is your responsibility to keep this information current.

Photo Agreement

I grant permission for my child to be included in any photos the school may use for the school newsletters, yearbooks, websites, Facebook, promotions, etc.

School Directory Agreement

I grant permission for my child's name, address and phone number to be included in a parent directory that will be given to all class members.

Service Hours:

All school families are required to perform 30 service hours. There is a \$15.00 per hour charge for service hours not completed during the school year. Please remember to log your hours in the volunteer log outside of the office.

Parent/Guardian Signature & Date

Parent/Guardian Signature & Date

K-8 Tuition Rates

The goal of the Church/School is that its members and their family attend church 100%. Members who maintain a church attendance of 50% or better on a quarterly basis will receive a member tuition rate while attending Holy Ghost Lutheran School. If attendance falls below 50% for the quarter, non-members rates may be assessed for the next quarter. Lack of attendance will prompt a follow up by the Board of Evangelism, Board of Christian Day School, and/or Board of Lay Ministry. Any extenuating circumstances should be brought to the attention of the Principal for review by the Board of Christian Day School.

	Annual Tuition for Members*	10-Month Member Payment Plan (August – May)	12-Month Member Payment Plan (June – May)	Annual Tuition for Non-Members*	10-Month Non-Member Payment Plan (August – May)
1 child (K-8)	\$2,850	\$285	\$238	\$3,150	\$315
2 child	\$4,275	\$428	\$357	\$5,775	\$578
3+ children	\$5,150	\$515	\$430	\$7,850	\$785

Students in grade 3-8 must have an iPad 2 or higher model for daily use. Special financing is available allowing families to purchase a new iPad. Insurance for replacement of an iPad is available as well, at a competitive rate. *iPads are financed over a one year period.* 8th grade students must have their device completely paid off in order to receive a report card at the end of the school year.

Preschool Tuition – Regardless of Church Affiliation

	2-Day AM	2-Day All Day	3-Day AM	3-Day All Day
Monthly (9-month)	\$98	\$189	\$118	\$236
Annual	\$880	\$1,700	\$1,060	\$2,120

Preschool Registration:

Please circle your preferred preschool program for each child

Name: _____ 2-Day AM / 2-Day PM / 2-Day All / 3-Day AM / 3-Day PM / 3-Day All

Name: _____ 2-Day AM / 2-Day PM / 2-Day All / 3-Day AM / 3-Day PM / 3-Day All

Name: _____ 2-Day AM / 2-Day PM / 2-Day All / 3-Day AM / 3-Day PM / 3-Day All

Registration/Materials Fee: A non-refundable registration/materials fee of \$100 per student is due by **March 1, 2018**. The fee is capped at \$250 per family.

Tuition Payments: Tuition is due by the 15th of the month, unless you are using the Simply Giving Program.

Financial Assistance: Information on applying for financial aid can be found at <http://www.holyghostmonroe.360unite.com/financial-aid>. To ensure unfettered consideration, please submit your application by **March 15, 2018**. **Submissions received after the deadline will not be guaranteed consideration, and/or may be approved at a reduced amount of aid.**

I understand that if I am unable to meet this financial obligation on time, a written notice must be given to the Principal or Board of Christian Day School prior to the due date. A late fee of \$25.00 will be added to the payment if tuition is not received by the end of that month. If payment is not received by the 15th of the next consecutive month, the student(s) will not be allowed to return to class, unless prior arrangements are made with the approval of the Board of Christian Day School. All tuition fees must be paid up to date before a student may re-enroll, or school records/transcripts are forwarded to another school (including eighth-grade students).

Parent/Guardian Signature & Date

Parent/Guardian Signature & Date

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Office Use Only

Date Registered _____

Total Amount Paid _____

Returning Student _____ New Student _____

Cash _____ or Check # _____