

**Holy Ghost Lutheran School**  
**Registration Form**  
**2020 - 2021**

Parents/Guardians \_\_\_\_\_ Phone \_\_\_\_\_

Cell Phone #1 \_\_\_\_\_ Cell Phone #2 \_\_\_\_\_

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 / School Directory Agreement**

I grant permission for my child to be included in any photos the school may use for the school newsletters, yearbooks, websites, promotions, etc. 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 at least 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)	\$3,150	\$315	\$262.50	\$3,465	\$346.50
2 children	\$4,725	\$472.50	\$393.75	\$6,405	\$640.50
3+ children	\$5,675	\$567.50	\$472.91	\$8,662	\$866.20

\*Students in grade 3-8 must have an iPad 2 or higher model, or recent Chromebook for daily use. Please be advised that Holy Ghost School will be transitioning to Chromebooks.

### Preschool Tuition – Regardless of Church Affiliation

	2-Day AM	2-Day All Day	3-Day AM	3-Day All Day	5-Day AM	5-Day All Day
Monthly(10month)	\$100	\$190	\$150	\$235	\$250	\$390
Annual	\$1,000	\$1,900	\$1,500	\$2,350	\$2,500	\$3,900

#### **Preschool Registration:**

Please circle your preferred preschool program for each child

Name: \_\_\_\_\_ 2-Day AM // 2-Day All // 3-Day AM // 3-Day All // 5-Day AM // 5-Day All

Name: \_\_\_\_\_ 2-Day AM // 2-Day All // 3-Day AM // 3-Day All // 5-Day AM // 5-Day All

Name: \_\_\_\_\_ 2-Day AM // 2-Day All // 3-Day AM // 3-Day All // 5-Day AM // 5-Day All

**K-8<sup>th</sup> Registration/Materials Fee:** A registration/materials fee of \$150 per student / \$400 per family is due by **March 1, 2020**. Registration fee increases incrementally per student and per family cap after March 1<sup>st</sup>. See attached letter.

**Tuition Payments:** Tuition is due by the 15<sup>th</sup> 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<sup>th</sup>**. **Submissions received after the deadline will not be guaranteed consideration, and/or may be approved at a reduced amount of aid.**

Holy Ghost Lutheran School does not discriminate on the basis of race, color, or national origin in administration of its educational policies or admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

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 15<sup>th</sup> 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

Office Use Only

Date Registered \_\_\_\_\_

Total Amount Paid \_\_\_\_\_

Returning Student \_\_\_\_\_ New Student \_\_\_\_\_

Cash \_\_\_\_\_ or Check # \_\_\_\_\_