



# ATONEMENT LUTHERAN SCHOOL REGISTRATION FORM 2020-2021

The registration fee must be turned in with this form in order to be considered enrolled. (The fee is refunded if class is filled to capacity or student ineligibility.) A copy of the child's birth certificate and social security card must accompany this form for all new students and children entering preschool or kindergarten.

## Section I: Student & General Information

Last Name		First Name, M.I.		Sex: Male / Female
Address			Ethnicity: Caucasian /African American/ Hispanic/Asian/Other	
City	State	Zip code	Date of Birth / /	
Month of Baptism (if Baptized)	Grade Entering	Telephone Number	Unlisted: Yes / No Permission to publish in school family directory: Yes / No	
As a parent or guardian of this student, you hereby consent to the use of photographs/videotape taken during the course of the school year for publicity, promotional/and or educational purposes (including publications, presentations, or broadcast via newspaper, internet, or other media sources). You do this with full knowledge and consent and waive all claims for compensation for use, or for damages.				
By signing this document, you are giving consent.		<input type="checkbox"/> By checking this box, you are <i>withholding</i> consent.		
Check if currently participating or planning to participate in (pending eligibility): <input type="checkbox"/> Band <input type="checkbox"/> IEP Resource Room <input type="checkbox"/> Speech/Language Only				
Tuition Payment Option (EZCARE): <input type="checkbox"/> Annual <input type="checkbox"/> 12 month (July-June) <input type="checkbox"/> 10 month (July-April) <input type="checkbox"/> Quarterly <input type="checkbox"/> Semester				
Church Affiliation: <input type="checkbox"/> Atonement <input type="checkbox"/> Chapel of the Cross <input type="checkbox"/> Good Shepherd <input type="checkbox"/> Living Christ <input type="checkbox"/> Other Lutheran church: _____ <input type="checkbox"/> Non-Lutheran church: _____				
Public School District/Attendance Site (please check one and list building name): <input type="checkbox"/> Ferguson/Florissant    Building Name: _____ <input type="checkbox"/> Hazelwood    Building Name: _____ <input type="checkbox"/> Riverview Gardens    Building Name: _____ <input type="checkbox"/> Jennings    Building Name: _____ <input type="checkbox"/> Other District: _____/Building Name: _____				
<b>New Students (Grades 1-8): an appointment with the principal must be arranged to review entrance requirements and transcripts.</b>				
Previous School Attended prior to Atonement:				
School's Address		City	State, Zip Code	
School's Phone Number		School's Fax Number		

## Section II: Parent Information

<b>Parent #1 Information</b>	Prefix Mr. / Mrs. / Ms.	Name (Last, First)	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-mother <input type="checkbox"/> Step-father <input type="checkbox"/> Legal Guardian
	Address <input type="checkbox"/> Same as student		City, State, Zip Code
	Employer	Work Phone: _____ Ext. _____ Cell Phone: _____	
	SSN:	Email:	
<b>Parent #2 Information</b>	Prefix Mr. / Mrs. / Ms.	Name (Last, First)	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-mother <input type="checkbox"/> Step-father
	Address <input type="checkbox"/> Same as student		City, State, Zip Code
	Employer	Work Phone: _____ Ext. _____ Cell Phone: _____	
	SSN:	Email:	
<b>Non-resident Parent:</b>	Prefix Mr. / Mrs. / Ms.	Name (Last, First)	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-mother <input type="checkbox"/> Step-father
	Address		City, State, Zip Code
	Telephone Number		

## Section III: Financial Responsibility

<p><u>Please Select All Parties Responsible for Paying Tuition:</u></p> <p> <input type="checkbox"/> Parent #1               <input type="checkbox"/> Parent #2               <input type="checkbox"/> Other: _____ Relationship to Student: _____         </p>
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Parent/Guardian signature indicates support of Atonement Lutheran School policies and faithful payment of tuition and fees when due.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_