



ATONEMENT LUTHERAN SCHOOL **PRE-REGISTRATION FORM** **2019-2020**

A non-refundable* deposit of \$100 must accompany this form which is applied toward the total registration fee in August. (*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.

FOR OFFICE USE
 DATE RECEIVED: _____
 PRE-REGISTRATION FEE: _____
☐ \$100 ☐ COUPON
☐ OTHER AMOUNT: \$ _____
 CASH / CHECK # _____

Section I: Student & General Information

Last Name		First Name, M.I.		Sex: Male / Female	
Address					
City	State	Zip code	Date of Birth / /		
Month of Baptism	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: _____					
New Students (Grades 1-8): an appointment with the principal must be arranged to review entrance requirements and transcripts.					
Previous School Attended prior to Atonement:					
School's Address			City	State, Zip Code	
School's Phone Number			School's Fax Number		
Preschool 4 Students: Please check one <input type="checkbox"/> 5 days- full <input type="checkbox"/> 5 days- half-day <input type="checkbox"/> 3 days- full <input type="checkbox"/> 3 days- half-day					

Section II: Parent Information

Parent #1 Information	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:	
Parent #2 Information	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:	
Non-resident Parent:	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>

Parent/Guardian signature indicates support of Atonement Lutheran School policies and faithful payment of tuition and fees when due.

Parent's Signature: _____ Date: _____