



Trinity Lutheran School

406 S. Lakeview
Sturgis, MI 49091
(269) 651-4245

ENROLLMENT FORM & STUDENT INFORMATION FOR KINDERGARTEN STUDENTS

Date _____

Please check which session you would prefer your child be placed in:

___ Morning (7:50 a.m. – 10:50 a.m.) ___ Afternoon (11:30 a.m. – 2:30 p.m.) ___ no preference

(At least 10 students are needed to have an afternoon session. Otherwise, those signing up for the afternoon will be placed in the morning session.)

Describe any extenuating circumstances: _____

School administration will make the decision on class placement.

Last Name _____ First _____ Initial _____

Address _____ City/State/Zip _____

Phone _____ Date of Birth _____

E-mail _____

Father's Name _____ Address _____

Mother's Name _____ Address _____

Parent's Marital status: Married ___

Separated ___ Divorced ___ Never married ___ Other _____

Who does the child live with: Father Mother Other _____

Are there any stepparents?

Stepfather _____ Stepmother _____
(Name) (name)

Church membership Trinity Other: _____ None

Has your child been baptized? _____ If so, when? _____

Name of last school attended _____ City _____

In which public school district do you live _____

Please list two adults who would assume responsibility for your child in an emergency

if neither parent can be reached:

Last Name _____ First _____ Phone _____

Last Name _____ First _____ Phone _____

If your child stays with someone else part of the day, with whom does he/she stay

Last Name _____ First _____ Phone _____

Please list any names of people to whom your child is **NOT** to be released:

Last Name _____ First _____ Phone _____

Last Name _____ First _____ Phone _____

Names of brothers and sisters (list oldest first)

Name _____ Date of Birth _____ Grade _____ Sex _____

Name _____ Date of Birth _____ Grade _____ Sex _____

Name _____ Date of Birth _____ Grade _____ Sex _____

Name _____ Date of Birth _____ Grade _____ Sex _____

Please add any special remarks about your child that would be helpful to a teacher, including health background, traumatic experiences, etc.

A \$50 non-refundable enrollment fee, per child, is required when submitting this form. This fee will be applied to the book fee, which is due in August.

Before Trinity will accept a new student, the parents need to:

- meet with the principal to discuss what Trinity can offer your child, answer questions you may have, see where your child is at academically, and to tour our facilities.
- bring in a copy of your child's birth certificate
- bring in a copy of you child's most recent report card
- return this enrollment form and the enrollment fee

Parent's signature _____ Date _____

**TUITION SCALE FOR THE
2011 - 2012 SCHOOL YEAR**

Basic Tuition
Kindergarten = \$1750

Active Members of Trinity
Kindergarten = \$1140

Registration/Book Fee (non-refundable) \$165 per student.

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FOR OFFICE USE ONLY

Date received _____ Date Enrolled _____

Date fee Rec. _____ Amount rec. _____

Check number _____