



Student School Application

Process for Student Enrollment

1. Complete all parts of this application (2 sides).
2. Submit copy of **Immunization Record**.
3. All students must also submit the non-refundable **\$350 registration fee**.
4. **Sign Tuition Contract with Financial Officer.**

Student Information

Student Name:		Female Male
		Ethnicity:
Student Home Address:		Student Home Phone:
Date of Birth:	Place of Birth:	
Previous School:	Address and phone number of school:	
Sibling(s) attending Beautiful Saviour Lutheran School: Yes No _____	Start Date:	Grade Entering:

Guardian Information - Please list primary caregiver as #1

<u>Guardian #1</u>	Cell Phone	Residence Telephone
Residence Address	City, State, Zip	
Employed by	Personal Email	Business Telephone Ext
Business Address	City, State, Zip	
<u>Guardian #2</u>	Cell Phone	Residence Telephone
Residence Address	City, State, Zip	
Employed by	Personal Email	Business Telephone Ext
Business Address	City, State, Zip	

Health Information

Family Physician _____ Telephone _____

Please check conditions your child has or has had in the past year and give approximate date.

Head Injury _____

Hay Fever _____

Diphtheria _____

Pneumonia _____

Scarlet Fever _____

Ear Infection _____

High Blood Pressure _____

Low Blood Pressure _____

Broken Bones _____

Asthma _____

Eczema _____

Polio _____

Rheumatic Fever _____

TB (self or family) _____

Mumps _____

Measles _____

Chicken Pox _____

Kidney Infection _____

Epilepsy _____

Hemophilia _____

Diabetes _____

Others, please specify _____

Is your child on any regular medication? _____

Is your child given to any of the following?

_____ frequent colds

_____ fainting

_____ headaches

_____ nervousness

_____ nosebleeds

Does your child require the use of glasses? _____ a hearing aid? _____

Has your child had any surgery or serious injury? (please specify)

When did your child last have a physical examination?

Please give any other health information which you feel may be pertinent

Church Information

Name of church currently attending: _____	Is your child Baptized? Yes Baptism Date: _____ No
Pastor's Name _____	Would you like your child to be baptized? Yes No
Is this a WELS church? Yes No	Is your child regularly attending church? Yes No
Are you active members of your church? Yes No	Does your child regularly attend Sunday School? Yes No

**Parents, please read and initial each of these statements
then sign and date the document on the appropriate lines.**

Initials	The Parent's Role at Beautiful Saviour Lutheran School
	I have read the current school handbook for Beautiful Saviour Lutheran School and agree to comply with all aspects of the handbook, including, but not limited to the specific items listed below
	I understand that Beautiful Saviour Lutheran School is a religious organization and a part of the Wisconsin Evangelical Lutheran Synod (WELS), who intends to instruct the children placed in its' care the doctrine of the WELS in accordance with the true Word of God as found in the Bible.
	I will make every effort to attend and have my child(ren) fully participate and will inform the teacher in advance if unable to attend.
	I have read and understand the dress code policy of Beautiful Saviour Lutheran School as found in the handbook and agree to comply with it.
	I understand that discipline is an important part of education and pledge to support the teachers and staff in the discipline of my child. I give my permission to the principal and teachers to discipline my child as the need and situation warrant.
	I will faithfully support the school through my prayers and positive attitude, and in keeping with Matthew 18:15, I am committed to giving a good report by sharing complaints and negative comments only with the people involved.
	I will fulfill my financial obligation to the school by paying my tuition and registration bills in full and on time. I understand that a member of the Financial Officer's team will contact me if a problem arises with my payments. (See Financial Contract for details)
	I understand that Beautiful Saviour Lutheran School exists to assist me in the nurture and instruction of my child both academically and spiritually. Therefore I pledge to be involved and supportive as a parent by encouraging and participating in regular communication with my child's teacher and principal. I also agree to assist the work of the teacher by supervising my child's homework and see that it is done completely and on time on a daily basis.
	Upon enrolling my child in Beautiful Saviour Lutheran School, I give my permission to the principal and teachers to seek medical attention in case of an emergency.
Please share any pertinent information regarding your child and family that Beautiful Saviour should be aware of: _____	

I have read and agree to these requests.

(Parent Signature)

(Date)