

Enrollment Application

School Year 2010 ~ 2011

First Lutheran School
1810 Northampton Street
Holyoke, MA 01040

(413) 532-4272 Fax (413) 534-4239

Child Information

To enter Grade

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Last First Middle

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Address Street City State Zip

--	--

Telephone Number E-mail Address

--	--	--

Male/Female Date of Birth Place of Birth (City) (State)

Child lives with _____

Parent Information

Father

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Last First Middle Place of Birth

--	--

Place of Employment / City / Occupation Work Number

Mother

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Last First Middle Place of Birth

--	--

Place of Employment / City / Occupation Work Number

Names & ages of brother(s) _____

Names & ages of sister(s) _____

When parents are both living, check if; married _____ divorced _____ separated _____ other _____

Church Affiliation:

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Father

Mother

Child

Child's date of baptism _____

If child has any handicaps or experiences difficulty in school, please explain:

Date

Signature

Office Use Only	Payment Preference (circle one)	_____ Monthly Savings / Monthly	Checking
		_____ In Full	(VOIDED CHECK)
Received	____/____/____	Date	Check #
			Amount
			Also see
			Grade
Enroll	_____		
Tuition	_____		
Screen	_____		
Screening date	_____	Emergency Form	_____
		Health Forms	_____
		Transfer Records	_____