

**REGISTRATION FORM
ST. PAUL LUTHERAN SCHOOL
2007-2008 School Year**

LAST NAME: _____

NAME OF CHILD(REN)	PRESENT GRADE

The **\$100.00 registration fee per child**, the **Registration Form** and the **State Mandated Form** are all necessary to insure enrollment into St. Paul Lutheran School. **Registration forms will not be processed without the appropriate registration fees.** Deadline for registration is **February 28.** **The registration fee after February 28 will be \$250.00 per child.** Registration fees are non-refundable.

Open enrollment begins February 7, 2007. If a classroom reaches maximum capacity, those who have not completed the requirements for registration will be placed on a waiting list.

Parent/Guardian signature: _____ Date: _____

If parents are NOT members of St. Paul, would you like to be contacted about enrolling in the Adult Instruction Class? YES NO

Office Use

No. of Students _____ Date Received _____

Amount enclosed _____ Received by _____

Check number _____