

FOR SCHOOL YEAR:
2006-07

APPLICATION FOR ENROLLMENT
ST. PAUL LUTHERAN SCHOOL
608 E. COLUMBIA
FARMINGTON, MO
573-756-5147

OFFICE USE ONLY

Rec'd _____

Member _____

Nonmember _____

Reg. _____ Ck# _____

FOR GRADE:

Student's Name _____
(last) (first) (middle) (nickname)

Address _____
(street) (city) (state) (zip)

Phones: (home) _____ (cell) _____ (father's work) _____
(cell) _____ (mother's work) _____

Place of birth _____ Date of birth _____

Social Security # _____ Sex: Male Female

(For Kindergarten students, please submit copy of birth certificate and updated immunization form to the school office..)

FATHER/GUARDIAN

MOTHER/GUARDIAN

Name _____

Name _____

Address _____

Address _____

Occupation _____

Occupation _____

Employer _____

Employer _____

Who will be responsible for payment of tuition? _____

Child lives with: Parents Guardian Mother only Father only

Siblings/dates of birth

CHURCH INFORMATION

Family attends Church/Sunday School/Bible Class ___ regularly ___ occasionally(1-2 per mo.) ___ seldom

Church presently attending: _____

Pastor's name _____ Church Phone _____

Church address _____ Church Membership: ___Mother ___Father

Are you interested in membership at St.Paul ? Yes No

Has your child been baptized? Yes No If so, where/date