

G E T H S E M A N E



L U T H E R A N

651-739-7540

Student Re-Enrollment Application

Print clearly in ink. Only completed applications will be considered; signed tuition-policy and non-refundable tuition pay-down must be attached for application to be considered complete.

STUDENT INFORMATION

Student's full name _____ Gender: M F

first middle last

Birthdate _____ Grade entering _____ Today's Date: _____

Address _____

City _____ State _____ Zip _____

If available, do you desire bus service? Yes _____ No _____ AM only _____ PM only _____

Students residing in District 622 may also be bused from daycare; please provide daycare address and nearest intersection: _____

Will you be using Gethsemane's Extended Daycare? Yes _____ No _____

Instruments student plays: _____

Sports student plays: _____

Home Phone _____ Cell Phone Number _____

E-mail address (address to be added to "Parent" group) _____

Student resides with _____

Parent/ guardian name(s) relationship

FAITH INFORMATION

Name of Church that Family Attends _____

Has Student been baptized? _____ Yes _____ No If so, give date or year _____

List any Religious Education or Faith Nurture in Past Year *(include type of activity)*

1. _____

2. _____

3. _____

FAMILY INFORMATION

Father/guardian Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone Number _____

Employer _____ Job Title _____

Work E-mail address _____ Work Phone _____

Does your company have a matching gift program? _____ Yes _____ No

If remarried, spouse's name _____ List on correspondence? _____ Yes _____ No

Mother/guardian Name _____

Address (if different from above) _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone Number _____

Employer _____ Job Title _____

Work E-mail address _____ Work Phone _____

Does your company have a matching gift program? _____ Yes _____ No

If remarried, spouse's name _____ List on correspondence? _____ Yes _____ No

SIBLING INFORMATION

	<i>Name</i>	<i>Age</i>	<i>School</i>	<i>Grade</i>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

ALUMNI INFORMATION

Please list brothers, sisters, parents or grandparents who are graduates of Gethsemane Lutheran or Walther Junior High:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

WALKING HAND-IN-HAND

Gethsemane Lutheran School partners with students and parents to provide an education where academic excellence and faith formation walk hand in hand. We believe we have a special calling and responsibility to educate the whole child: body, mind and spirit. We believe every child has God-given talents to discover. We seek to help students find their place in this world so that they may use their gifts in service to the world.

This work requires the steadfast partnership of students, parents, school, and faith-community. As parents/guardians, please indicate contributions you will offer to this partnership.

COMMITMENT TO FINANCIAL SUPPORT

Person(s) who will be responsible for Tuition Payments: _____

Students are eligible for re-enrollment only when fees and tuition are current. Additionally, we/I have read the printed Gethsemane Tuition Policy and agree to abide by the terms therein for the upcoming school year. We/I understand that the Tuition Paydown holds a place for our/my child and is non-refundable.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

I certify that the information on this application is complete and accurate to the best of my knowledge.

Student Signature

Date

Parent/Guardian Signature

Date

Include with application: non-refundable tuition pay-down.
To: Gethsemane Lutheran School, 2410 Stillwater Road, Maplewood, MN 55119