



APPLICATION/REGISTRATION FORM 2017-2018 SCHOOL TERM

We are pleased that you are interested in the opportunities for your son/daughter at Lincoln Lutheran!
 To reserve a place for the 2017-2018 school term, please complete this form and return it as soon as possible.
The registration fee does not need to be submitted with this registration form - it will be billed through FACTS.
 The registration fee is non-refundable except in cases of denied enrollment or extenuating circumstances.

REGISTRATION FEE PER CHILD FOR THE 2017-2018 SCHOOL YEAR:

Grade Level	If Registered by March 15	If Registered after March 15
6 th – 8 th	\$225	\$325
9 th – 12 th	\$250	\$350

Students new to Lincoln Lutheran will pay the early registration fee, even if registering after March 15.
 Families qualifying for free/reduced lunch are required to make a \$25 registration deposit per child with the balance of the registration fee due July 20.

TUITION RATES FOR THE 2017-2018 SCHOOL YEAR:

	Grade 6	Grades 7-8	Grades 9-12
Tuition Rate	\$6,875	\$7,875	\$9,275
Association Member Discount	\$1,150	\$1,150	\$1,150
Association Member Tuition	\$5,725	\$6,725	\$8,125

Important Reminders

Association congregations support at least 25% of the Association member tuition for each member student.
 All students will be assessed a \$125 Technology Fee as part of the final registration process in late summer.
 Additional information regarding students new to Lincoln Lutheran will be collected prior to the start of school.

<u>Legal</u> Last Name, First Name of Student(s)	M/F	Date of Birth (MM/DD/YYYY)	Church Membership	Grade for 2017/2018	Registr. Fee
Total Registration Fee Due upon Notification from FACTS Mgt.					

Legal Guardian(s): _____
(Please Print Legibly)
(Please Print Legibly)

Legal Guardian Signature: _____

Is Either Parent or Guardian an LCMS Full-Time (minimum of 30 hours per week) Employee? _____

Student Address: _____

City, State, Zip: _____ **Phone #:** _____

School Student(s) Currently Attend: _____

E-mail Address(es) to be Used for FACTS Billing: _____