



ZION LUTHERAN SCHOOL
2022 – 2023 REGISTRATION FORM

Your child must be the appropriate age by August 1, 2022

PLEASE PROVIDE A COPY OF YOUR CHILD’S BIRTH CERTIFICATE & IMMUNIZATION RECORDS

I am registering my child for: _____ PS2 _____ PS3 _____ PS4

(Child’s First Name) _____ (Middle) _____ (Last)

_____ Male _____ Female Birthdate _____ Has your child been baptized? _____

Address _____ City _____ Zip code _____

STUDENT LIVES WITH:

_____ Parents _____ Mother & Stepfather _____ Mother
 _____ Father _____ Father & Stepmother _____ Grandparents
 _____ Guardian

If parents are divorced, custody was granted to: _____ Joint _____ Mother _____ Father

MOM Name _____ DAD Name: _____
 MOM Work Phone _____ DAD Work Phone _____
 MOM Employer _____ DAD Employer _____
 MOM Cell Phone _____ DAD Cell Phone _____
 Email Address Mom _____ Email Address Dad _____
 Church Membership _____

Are you enrolling any other child in our school? _____ YES _____ NO If Yes, which Class? _____

Did your child attend Preschool/Kindergarten last year, if so where? _____

Does your child have any Allergies? If YES, please List: _____

AUTHORIZED PICKUP PERSONS

Name	Relationship to Child	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

PARENT AUTHORIZATION

- I authorize the school to release information about my child for further education and/or treatment.
() Y () N
- I authorize the school to act in case of illness or injury if I cannot be reached.
() Y () N
- I authorize the school to use pictures which include my child.
() Y () N
- I agree to have my name and phone number included on the parent roster.
() Y () N
- I agree to allow my child to take supervised trips to other areas of the church building and grounds with a teacher or teacher’s assistant (chapel, back yard).
() Y () N

