

1701 E. PARK BLVD.
PLANO, TX 75074
(972) 423-7448



LUTHERAN HIGH SCHOOL

_____ Grade 9
_____ Grade 10
_____ Grade 11
_____ Grade 12

For Office Use Only:
Application Date: _____
Amt. paid/ck.#: _____
Enrollment Date: _____

Re-enrollment Fee (returning students): \$50
Annual Tuition: \$630 per credit _____
Omnibus Courses \$1260 / 3 credits _____
Simply Giving \$4 _____
Separate form needed

**2015-2016
APPLICATION FOR ON-LINE HIGH SCHOOL RE-ENROLLMENT**

Name of Student _____ Sex _____
Address _____ (First) (Middle) (Last)
City _____ Zip _____ Phone _____
Birth Date _____
Father's Name _____ Cell Phone _____
Email _____
Mother's Name _____ Cell Phone _____
Email _____

COURSE OFFERINGS FOR 2015-2016

Please check classes student will be taking.

Omnibus II _____

Omnibus IV _____

PARENT'S PLEDGE OF ACCEPTANCE

We as parents who are accepting the challenge to "train up a child in the way he should go," do state that this training will be carried on in the home. We shall place our trust in the Christian school to extend the training more completely.

We pledge that our child will bring to the school a heritage of CHRISTIAN CULTURE. We promise that the home will provide a secure haven of safety – free from the influences that we recognize as harmful.

We do hereby state that we have made an investigation of Faith Lutheran School and do pledge to make our choice for the complete school year.

We agree to faithfully support the school financially according to arrangements that have been made and to conclude all required payments on or before the last day of school. We understand that if payments or other fees are not paid by the due date, our child may be removed from the school.

We realize that enrolling our child in Faith Lutheran is a PRIVILEGE, NOT A RIGHT. We agree to abide by the rules of the school and the administration. If it becomes apparent that we cannot work in harmony, we will quietly withdraw our child from the school.

We as parents of the student applicant do sincerely give our pledge to all items as stated above.

Date _____

Parents' or Guardians' Signatures _____