



Holy Trinity Lutheran School

Teaching Young Minds Preparing Young Hearts

4201 Burlingame Street, S.W.
Wyoming, Michigan 49509

Phone: (616) 538-1122
Web: holytrinitylutherschool.com

DAY SCHOOL REGISTRATION FORM

(Please fill out an entire form for each student enrolled. Include all information.)

Personal Information

Student's Full Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ Email Address _____

Date of Birth ____ / ____ / ____ Place of Birth _____ S.S. # ____ - ____ - ____

Gender _____ Public School District Name _____

Grade Entering _____ Number of Siblings _____ Ages of Sibling(s) _____

Is the Student Baptized? _____ Date of Baptism ____ / ____ / ____

Family Information

Father's Full Name _____ Father's Occupation _____

Place of Employment _____ Father's Work Phone _____

Mother's Full Name _____ Mother's Occupation _____

Place of Employment _____ Mother's Work Phone _____

Parent's Marital Status: Married Divorced Separated Spouse Deceased

With whom does the child live?

- | | |
|---|---|
| <input type="checkbox"/> Both natural parents | <input type="checkbox"/> Mother only |
| <input type="checkbox"/> Father only | <input type="checkbox"/> Step-father and natural mother |
| <input type="checkbox"/> Step-mother and natural father | <input type="checkbox"/> Other _____ |

Previous Schooling (if applicable)

School Name _____ Dates Attended _____

School's Address _____

City _____ State _____ Zip _____

Signature

Parent/Guardian Signature _____ Date _____

PLEASE TAKE NOTE: In attaching your signature to this application, both student and parent/guardian acknowledge their understanding that admission to Holy Trinity Lutheran School places the student under the policies and regulations of the school, as established by the Board of Education, and obliges both student and parent/guardian to accept and to cooperate with those policies and regulations.