Trinity Lutheran School and Early Childhood Center

40 W. Nicholai St. Hicksville, NY 11801 516-931-2211 www.TrinityLI.org



Registration Form Kindergarten – Grade 8

Please complete the information on this form and return it to the school office by March 1,2021 A check for the appropriate amount, payable to Trinity Lutheran School, must accompany this form. Thank you.

1 arcii	13/ C	Guardians(Last)		(First)				
Street 2	Add	ress						
City St	tate	Zip			Pho	ne		
		e student's last name if different fro iire a second mailing of report card	1					
II you	rcqu	are a second maining of report card	.s, turdon bii	mig, etc., picase s	pechy to v	viioiii aiid ti	ne address.	
			Grade Next Year	Registration Amount	OFFICE USE ONLY			
		Name of Student(s)			Date	Amount	Check #	
	1							
	2							
	3							
	4							
Church	. Δ f	filiation				•		
		ublic school district in which the st						
1 variic	or p	ubile selicol district in which the si	iddelit(3) Tes	Ide(3)				
Regist	rati	on fees:	4007 1					
Please 1	note:	Paid reregistration holds the student's p		t by March 1st rade. <i>Registration fe</i>	ees are not i	refundable. T	he fee includes:	
technolo	ogy f	ees, PTFA dues, cost of religious materia	als, student ac	cident insurance, and	d other misc	ellaneous fees	S.	
		ayment Options						
		yments begin in July each year. Inf ement. Payments options are: to pa						
		Fund (LCEF), or to pay by credit of		gereet a payment p		Sir the Dath	crair Grarer	
Public	ity]	Policy						
Studen	its m	ay be photographed or videotaped					•	
		parent or guardian submits a writte in request is received, it will be assu	-			•	-	
		licity. The written request should:			pear iii pie	tures or via	cos associated w	
		-	- •					
Parent/Guardian Signature					Date:			