

The Lutheran High School of Kansas City

Enrollment Application

STUDENT Last Name	First Name		Middle Name		
Gender:	Birth date/				
Address					
Street		City/St	ate		Zip
Household Phone Numbe	er ()	Stud	dent Cell# (_)	
Lives with: Mother, Fathe	r, both Parents, Guardian (cir	cle)			
I would like duplicate repo	ort cards, newsletters, etc. ser	nt to: Mothe	r	Father	
MOTHER or Legal Guard	ian		_ Cell Phone (_)	
Address (if different from	Student)				
Employer	Street	City/St Work F			Zip
E-Mail Address					
	an				
Address (if different from	Student)				
	Street	City/St			Zip
E-Mail Address					
Doctor:		Doctor's Phone	e: ()		
Emergency Contact (if un	able to reach parents):		Rela	ationship	
Best Number to Call: ()				
School attended prior to I	LHS-KC		_ Phone (_)	·
School District in which st	tudent resides:				
Church student attends:_					
Ethnic information is used child.	d for school data base researc	h purposes only	. Please circle	the one which	best descri
African America	an Native American Asian	Hispanic Cau	Jcasian Othe	r	

Upon request, Lutheran High School - Kansas City provides addresses or phone information fo Booster Club functions, or other similar school related purposes. Please initial if you give perm demographic information to be distributed for these purposes.	• •
астод-ар-те то то се се столисте и столе регрессе.	initial
I/We understand that photographs and/or video taken involving my/our child while a student a Kansas City may be used in publicity of Lutheran High School - Kansas City.	t Lutheran High School -
	initial
I/We understand that at times my/our student may have access to the internet. I/We also under impossible for Lutheran's administrators, faculty and staff to monitor or restrict access to all converse when students are given access to the internet. I/We hereby release Lutheran High School - Karandany institutions with which it is affiliated from any and all claims and damages of any nature my/our student's use, or inability to use this access. This policy will be in effect for the entire so cancellation is submitted in writing.	ontroversial materials ansas City, its operators, re which may arise from
I/We accept Lutheran High School - Kansas City's practice to have my/our student tested (at pa	arents' expense) if
suspicion of drug or alcohol use exists, in accord with our current policy regarding substance ab	•
I/We submit this enrollment application, agreeing to the fees and policies of Lutheran High Sch 2021/2022 school year. Admission may be withdrawn at any time if information provided in the admission documents, or admission interviews is not complete and accurate.	•
,	initial
I/We understand registration fees are non-refundable. The school may hold records, including transcripts, if tuition or other school related bills are not fully paid.	report cards and
	initial
I/We understand that should I/we remove my/our children from Lutheran High School - Kansas school year; all advance tuition paid to that point in time will become the property of Lutheran City.	
City.	initial
I/We would be available to participate (volunteer) in: (Please circle one or more) Event Chaperone Athletic Boosters Work Days Concessions	Thrift Store
Statement of Non-Discrimination	
Lutheran High School - Kansas City admits students of any race, religious preference, color, no all rights, privileges, programs, and activities generally accorded, or made available to, stude not discriminate on origin in administration of its educational policies or other school administ	nts at the school. It does
Parent/Guardian Signature Date	
Parent/Guardian Signature Date	
Student Signature Date	
Student acceptance at Lutheran High School - Kansas City will be based upon successful comp process.	letion of the enrollment