NORTHLAND LUTHERAN HIGH SCHOOL

2016-2017 STUDENT ENROLLMENT INFORMATION

STUDENT IN	FORMATION				
Full Name:					
Address:	First Street Route	Middle	City	, Wisconsin	
Phone:	Primary	Secondary		Student Cell if applicable	
Sex (circle):	M F Date of	Birth:	Age:	Race:	
School District	t in which student resid	es:	County:		
FAMILY MEM	MBER INFORMATION				
FATHER (or MALE GUARDIAN)			MOTHER (or FEMALE GUARDIAN)		
Name:			Name:		
First Address:	MI Last	-	First Address:	MI Last	
Email:			Email:		
Home Phone:			Home Phone: _		
Cell Phone:			Cell Phone:		
Employer: Employer:					
Work Phone: Work Phone:					
Marital Status: Single Married Widowed Divorced			Marital Status: Single Married Widowed Divorced		
STUDENT ED	DUCATION HISTORY				
Please list all s	schools that student has	s previously attended:			
School Name		Address			

CHURCH BACKGROUND						
Does your family regularly attend church? YES NO Is family presently a member of a church						
If YES, please list church denomination:						
Name & City of Church: Pastor:						
TRANSPORTATION						
Please check one of the following:						
☐ We request that Northland provide bus transportation						
☐ We request that DC Everest provide bus transportation through First Student						
\square We will be responsible for providing transportation the following way (please check any that apply):						
 Parent(s) / Guardian(s) will drive 						
 Student will drive (please complete Student Automobile Information section below) 						
 Another family member or fr 	Another family member or friend will drive – Name:					
o Other:						
STUDENT AUTOMOBILE INFORMATION						
Students are permitted to drive an automobile to school provided that the following guidelines are followed: ☑ Parent(s) / Guardian(s) have given student permission to drive to school ☑ Student is legally licensed ☑ Adequate insurance is in place on vehicle being driven ☑ Automobile is not in use during school hours ☑ Student drives responsibly						
✓ All parties agree that Northland Lutheran High School is not liable during trip to and from school						
I,, hereby consent for the student listed on previous page to drive						
Print Name of Parent/Guardian an automobile to and/or from NLHS during th	ne current aca	idemic session under the guidelines listed above				
an automobile to and/or from NLHS during the current academic session under the guidelines listed above.						
I agree to relieve NLHS from any liability while student is en route either to or from the NLHS campus.						
Parent/Guardian Signature:						
CICNATUDEC						
SIGNATURES		Date				
Student:						
Parent/Guardian:	Date:					
PLEASE INCLUDE A \$100 NON-REFUNDAB	LE DEPOSIT W	VITH THIS FORM TO BE APPLIED TO YOUR 2016-201	7 FEES.			

OFFICE USE ONLY: DATE RECEIVED _____ CHECK#____ | CASH AMOUNT PAID: \$ _____