PARENT AUTHORIZATION FORM

PLEASE READ THE FOLLOWING STATEMENTS AND AKNOWLEDGE IN THE APPROPRIATE SPACES.

SCHOOL POLICIES: I/We submit this enrollment application, agreeing to the fees and policies of Lamb of God Lutheran School. Admission may be withdrawn at any time if information provided in the application, or other admission documents, or interviews are not complete and accurate.

Parent/Guardian _____ _____
Initial Initial

FINANCIAL POLICIES: I/We understand registration fees are non-refundable. Curriculum fees are non-refundable after June 30th. Tuition payments are due on the 1st of each month. The school may hold records, including report cards and transcripts, if tuition or other school related bills are not fully paid. Our child will be suspended and our account turned over to collections if not paid within 60 days of due date.

Parent/Guardian _____ _____
Initial Initial

PARENT'S INTERNET RELEASE: I/We understand that at times our students may have access to the internet. We also understand that it is impossible for Lamb of God administrators, faculty, and staff to monitor or restrict access to all controversial materials when students are given access to the internet. I hereby release Lamb of God Lutheran School, its operators, and any institutions with which it is affiliated from any and all claims and damages of any nature which may arise from my child's use, or inability to use this access. This will be in effect for the entire school year unless cancellation is submitted in writing.

Parent/Guardian _____ _____
Initial Initial

PHOTO PUBLICITY RELEASE: I/We grant permission for any photographs taken involving my child while a student at Lamb of God Lutheran School to be used in connection with publicity (web site, newsletter, brochures, school video, etc) of Lamb of God Lutheran School. This does not include school pictures and yearbook.

Parent/Guardian _____ _____
Initial Initial

I HAVE READ ALL OF THE ABOVE STATEMENTS

Father/Guardian signature _____

Mother/Guardian signature _____