

Emmaus Lutheran School
8626 Covington Road, Fort Wayne, Indiana 46804
Phone - 260.459.7722 Fax - 260.459.7766
emmauslutheranfw.org kmartin@emmauslutheranfw.org

Application for Enrollment

Student Information

<hr/> <i>Last Name,</i>	<hr/> <i>First Name</i>	<hr/> <i>Grade Next School Year</i>		
<hr/> <i>Date of Birth</i>	<hr/> <i>Date of Baptism</i>	<hr/> <i>Place of Baptism</i>		
<hr/> <i>Previous Schools Attended and Dates of Enrollment</i>				
<hr/> <i>Student's Place of Residence</i>	<hr/> <i>Both Parents</i>	<hr/> <i>Father</i>	<hr/> <i>Mother</i>	<hr/> <i>Other, please explain</i>

Family Information

<hr/> <i>Father</i>	<hr/> <i>Mother</i>
<hr/> <i>Address</i> <hr/> <i>City</i> <hr/> <i>State</i> <hr/> <i>Zip</i>	<hr/> <i>Address</i> <hr/> <i>City</i> <hr/> <i>State</i> <hr/> <i>Zip</i>
<hr/> <i>Home Phone</i> <hr/> <i>E-Mail</i>	<hr/> <i>Home Phone</i> <hr/> <i>E-Mail</i>
<hr/> <i>Cell Phone</i> <hr/> <i>Work Phone</i>	<hr/> <i>Cell Phone</i> <hr/> <i>Work Phone</i>
<hr/> <i>Occupation and Place of Employment</i>	<hr/> <i>Occupation and Place of Employment</i>
<hr/> <i>Other children including ages</i>	

Church Affiliation

<hr/> <i>Father's Church Membership</i>	<hr/> <i>Mother's Church Membership</i>
<hr/> <i>Please list all other children and their date and place of baptism.</i>	
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Statement of Agreement *Please read carefully and sign.*

By enrolling my child in Emmaus Lutheran School we:

1. agree to support all school regulations and policies
2. agree to support and encourage the school staff in their work
3. understand that the tuition of members and non-members is significantly subsidized by Emmaus Lutheran Church
4. will make all school payments by the fifteenth of each month
5. understand that enrollment is not complete until all student records have been received and reviewed

<hr/> <i>Father's Signature</i>	<hr/> <i>Mother's Signature</i>	<hr/> <i>Date</i>
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