

Registration Form- Kindergarten- Grade 4  
2025-2026 School Year

Dear Parents,

To aid in its planning for the 2025-2026 school year, our Board of Education is requesting that each family sending a child to our school next year complete the enrollment form below. **Please note that school tuition has been set at \$1000 per year for the 1<sup>st</sup> child and \$950 for any additional children.** We ask that the form be returned by **May 1, 2025** to help the Board of Education and teachers in their planning. The Board of Education also asks that you speak with us if you have a need for assistance with tuition for the upcoming school year. We do have a tuition assistance fund and scholarships that can help you with tuition costs.

Only a registration fee of **\$25 per student** needs to be turned in to school by the deadline. The tuition amount is due the first day of school unless a family wishes to establish a payment plan at that time. If you have any questions, please call the school at (402) 565-4517.

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Trinity Lutheran Enrollment Form

Mother's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_ Texting? Yes No (Please circle)

Home Phone #: \_\_\_\_\_ Preferred method of communication: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Physical address: \_\_\_\_\_

Occupation/Employer: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_ Texting? Yes No (Please circle)

Home Phone #: \_\_\_\_\_ Preferred method of communication: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Physical address: \_\_\_\_\_

Occupation/Employer: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Child lives with: \_\_\_\_\_

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Church membership of parent/guardian:

\_\_\_\_\_

Full names of children to  
be enrolled in the Fall of 2025:

Birth Date  
M/D/Y:

Grade  
in Fall:

_____	_____	_____
_____	_____	_____
_____	_____	_____

Which school did your child(ren) previously attend:

\_\_\_\_\_

Does your child have an Individual Education Plan (IEP)?: \_\_\_\_\_

Emergency contact (not parents): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Signature of Parent / Guardian \_\_\_\_\_ Date: \_\_\_\_\_