

Elim Lutheran Church Registration Form 2021-2022



Parent/Guardian name(s): _____

Address: _____

E-Mail: _____

E-Mail: _____

Phone: _____

Phone: _____

Child 1: _____ M / F / Other D.O.B. _____ Gr. _____

Circle activity for this child.

LOGOS (K-Gr. 6) **LOGOS Confirmation** (Gr.7-9) **LOGOS HS Youth Group** (Gr.10-12)

Medical/neuroatypical information of which we should be aware?. (e.g. allergies, epilepsy, asthma, diabetes, autism, etc.)

Child 2: _____ M / F / Other D.O.B. _____ Gr. _____

Circle activity for this child.

LOGOS (K-Gr. 6) **LOGOS Confirmation** (Gr.7-9) **LOGOS HS Youth Group** (Gr.10-12)

Medical/neuroatypical information of which we should be aware?. (e.g. allergies, epilepsy, asthma, diabetes, autism, etc.)

Child 3: _____ M / F / Other D.O.B. _____ Gr. _____

Circle activity for this child.

LOGOS (K-Gr. 6) **LOGOS Confirmation** (Gr.7-9) **LOGOS HS Youth Group** (Gr.10-12)

Medical/neuroatypical conditions of which we should be aware? (e.g. allergies, epilepsy, asthma, diabetes, autism, etc.)

Tuition:

LOGOS \$20/child for fall. (Possible spring amount if we return to meals.) Family maximum \$50

Scholarship/Family assistance available.

Please speak to a pastor.

Office use