

**Trinity Lutheran Grade School—Registration Form  
Waco, Nebraska**

Name of child \_\_\_\_\_

(First, M.I., Last)

Date of birth \_\_\_\_\_ Gender: M/F

Is your child baptized: Yes/No

Church where your child was baptized \_\_\_\_\_  
(Name of church, denomination, and city)

Current church you attend \_\_\_\_\_  
(Name of church and denomination)

Other children \_\_\_\_\_  
(Names)

Special learning challenges or concerns \_\_\_\_\_

Does your child have any special physical needs? \_\_\_\_\_  
(please elaborate on the back if needed)

Parents or Guardians

Father \_\_\_\_\_

Address, home phone, cell and email \_\_\_\_\_

Place of employment \_\_\_\_\_

Mother \_\_\_\_\_

Place of employment \_\_\_\_\_

Address and cell, email, phone (if same, note same) \_\_\_\_\_

For transfer students

Last school attended \_\_\_\_\_  
(Name of school and address)

Last grade completed and passed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Signature and Date \_\_\_\_\_