



Christ Our Rock

LUTHERAN HIGH SCHOOL

9545 Shattuc Rd., Centralia IL
(618)226-3315
secretary@corlhs.org

**Re-Registration
Form
2022-2023**

Students(s) Name _____

Returning this form with the registration fee:

Re-Registration Fee (per student): \$75 by April 6 / \$150 after April 6.

1) Please choose a method of payment:

_____ Option A Pay-in-Full (by August 15, 2020)

_____ Option B Monthly Payments (must be done through automatic withdrawal from a bank account or by credit card through FACTS Management Company, the same company we have used for the past few years).

If B, circle which month you desire payments to begin for next year (all payments must be made by May);

June (12 payments) July (11 payments) August (10 payments)

_____ Option C Semester Payments (half by August 15, 2020 and the balance on January 15, 2021).

** Please do not send tuition payment with this form. A tuition invoice based on the information provided in this form will be sent to you. We will assist families in setting up the monthly payments through RenWeb.*

2) We, as parents, desire our student to continue their education at Christ Our Rock Lutheran High School and our signature Below signifies the following;

- We will actively support the school and our child's education and will keep open the lines of communication between school and home. We hereby acknowledge that continuation of attendance at CORLHS is dependent upon both the student and parents living a lifestyle that is in accordance with Biblical values as taught and promoted by this school and agree to abide by the policy and procedures as approved by the Association Board of Directors.
- We understand that photographs taken of applicant at school or school sponsored activities may be used in CORLHS publications, advertisements, websites and other promotions. According to FERPA (1974), information will not be disclosed to unprivileged individuals or groups and information will be given to specific individuals only with proper consent.
- We give permission to include our name, address, and phone number in the CORLHS directory.
- We agree to pay all tuition and fees according to policies as set by the Association Board of Directors.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Christ Our Rock Lutheran High School admits students of any race, color, sex, or national or ethnic origin to all the rights, Privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, sex, or national or ethnic origin in the administration of its educational policies, admission policies, Financial assistance, and other school administered programs.

Financial Information

Person(s) responsible for paying tuition _____

____ Yes, we are applying for Tuition Assistance (Please request a Tuition Assistance application from the CORLHS office. You must reapply every year for tuition assistance.)

Please take a moment to complete the reverse side of this form, updating any information that has changed.

Please note any changes: You may leave blank if there are no changes.

Home Address _____ Home Phone _____

Dad's Information;

Work Phone _____ Cell Phone _____

Email Address _____

Employer _____ Occupation _____

Mom's Information;

Work Phone _____ Cell Phone _____

Email Address _____

Employer _____ Occupation _____

Other Children in the Family;

1. _____ Age _____ 2. _____ Age _____

3. _____ Age _____ 4. _____ Age _____

Emergency Contact Information;

ER Contact #1: Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____

ER Contact #2: Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____

Church Information;

Church Membership _____ Denomination _____

Street Address _____ City _____ Zip _____

Pastor _____ Phone _____

Email Address _____