

2021-2022 LSA Re-Enrollment Form

Return one re-enrollment form per family for the 2020-2021 school year. LSA's enrollment process begins February 1st. The applicable fees should accompany this form to complete each student(s) enrollment. If you are a new family to LSA, please use the New Student Enrollment Form available in the office. If you have any questions please contact Susan Keane at skeane@lsadecatur.net.

Enrollment Fee (per student, non-refundable): February \$50 March - August \$100

Parent Last Name _____ Phone # _____

Church Currently Attending _____

Our family is enrolling the following students(s) for the 2021-2022 School Year:

Student(s) Name (Full first and last name)	Grade level for the coming school year	Enrollment Fee Included
1. _____	_____	\$ _____ – amount
2. _____	_____	\$ _____ – amount
3. _____	_____	\$ _____ – amount
4. _____	_____	\$ _____ – amount
5. _____	_____	\$ _____ – amount

Enrollment:

_____ We plan to enroll at the member tuition rate as an active member of an LSA association church or 8th grade graduate of LSA.

The school office will verify church membership directly with the association churches.

_____ We are enrolling at the non-member tuition rate.

_____ We are not planning to enroll at LSA for the 2021-2022 school year.

Finances (please check all that apply):

_____ We do not plan to file for financial assistance at this time.

_____ We plan to file for financial aid – **families must file for Empower Illinois grants prior to filing for LSA financial aid (LSA financial aid deadline is May 1st.)**

_____ We plan to **split** our tuition account the following way % _____ to Father % _____ to Mother.

_____ **A third party (not a parent)** will be responsible for paying tuition for the above students.

Payer Name: _____ Address: _____

Phone Number: _____ Email Address: _____

We understand that LSA reserves the right to cancel the enrollment of any student at any time for reason of deficiency in scholarship, unsatisfactory conduct, or failure to meet tuition payments. We understand that this enrollment fee is non-refundable. We understand that students may be asked to re-interview with the Administration prior to acceptance. We agree to accept all of the policy and financial regulations of the LSA as we enroll today for the coming school year.

Signature _____ Date: _____

OFFICE USE ONLY

Date: _____

Amount: _____

Check # _____