

# LCCS REGISTRATION

2018-19

CIRCLE THE CLASS AND DAYS FOR WHICH YOU ARE ENROLLING

Preschool - M T W T F

PreKindergarten - M T W T F

## PRIMARY SCHOOL

Kindergarten  
 Grade 1  
 Grade 2

Grade 3  
 Grade 4  
 Grade 5

## SECONDARY SCHOOL

Grade 6  
 Grade 7  
 Grade 8  
 Grade 9

Enrollment Fee: _____
Check # _____

Student's Name	Student's Address	City, Zip	Home Phone #
			DOB/Age
Mother's Name	Mother's Address	City, Zip	Mother's Home Phone #
Mother's Employment	Mother's Work Phone #	Mother's Cell #	Mother's email address
Father's Name	Father's Address	City, Zip	Father's Home Phone #
Father's Employment	Father's Work Phone #	Father's Cell #	Father's email address

all fields required