Lake Country Christian School

"If I can do it, I can learn it."

Lake Country Christian School Continuous Enrollment / Re-Enrollment Contract 2026-2027

Date: _____

Student Full Name: _____

Student 2026-2027 Grade Level: _____

Please initial one of the options below regarding your student and family documentation and information:

_____: The information reflected in my current enrollment documentation is accurate and requires no changes at this time.

_____: The information reflected in my current enrollment documentation is NOT accurate and requires changes at this time. *(If this option is selected, please notify the office at lakecountrychristianschool@cox.net or see Mrs. Glenna with changes needed).

Parent / Legal Guardian Full Name

_____

Parent / Legal Guardian Signature

_____

Date

_____

Lake Country Christian School
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74063

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