PARENT AGREEMENT FORM 2017-2018 School Year

We desire a quality Christ-centered education for our child(ren). We understand that this education is a partnership between parents, students, teachers, and the school. We will include St Paul Lutheran Church and School in our prayers and will work to keep the lines of communication open.

I DO / DO NOT	sones that T and my shild(non) will follow ashest policies, mules, and
1 00 / 00 NOT	agree that I and my child(ren) will follow school policies, rules, and procedures as set forth in the St Paul Lutheran School Policy Handbook. I also agree that if I have a problem with the school or any teacher or staff member, I will deal with it in a Christian manner.
I DO / DO NOT	give permission to use my child's photograph on the St Paul Lutheran Website or in publications.
I DO / DO NOT	understand the procedures for administering medications at school and will abide by those policies.
I DO / DO NOT	understand that my child(ren) may use the Internet at school and understand that it is impossible for St Paul staff to monitor or restrict access to all controversial materials.
I DO / DO NOT	agree to pay tuition, registration, lunch and educational fees regularly according to the payment schedule I have selected. I understand that if I am delinquent in making a payment, I may be assessed a late fee, my child's report card and other progress reports may be withheld, my child's records may not be transferred to another school, and/or my child may be removed from school.
I DO / DO NOT	wish to be contacted during school hours for any reason concerning my child and understand that this may mean I could be called at work.
Child(ren) names:	(please print)
Signed:	
Date:	