

WGCS Registration Form

Student's Name		Date of Birth	Present Grade	
Street Address		City, State, Zip		Home Phone
Present School		Present School Address		
Present School Contact Name		Present School Phone	Other information about present school	
Mother's Name	Address (if different from above)	Mother's work #	Mother's mobile	Mother's E-mail
Father's Name	Address (if different than above)	Father's work #	Father's mobile	Father's E-mail
Physicians Name		Phy. Phone #	Dentist's Name	
Emergency Contact Name		Phone #	Alternate Emergency Contact	
Dentist Phone				
Emergency Contact Phone				
Any Allergies (Explain)				
Signature of Parent(s)			Date	

Is there any other information about your child that you would like us to know (academic, emotional, or physical)?

WALNUT _____
 GROVE _____
 CHRISTIAN _____

- * Monthly Tuition is \$525.00 (K-12)
- *There is a 10% discount for tuition paid in full by August of the next year.
- *Tuition is due the first day of every month, August – July (12 total payments)

There is a non-refundable registration fee of \$150.00 due with this form. Please make checks payable to **Walnut Grove Christian School**.
Scholarships are available – please ask for information.