



Good Shepherd Lutheran School

3201 Court Street, Pekin, Illinois 61554

Phone: 309-347-2020

Fax: 309-347-9099

www.goodshepherdpekin.com

office@goodshepherdpekin.com



2018-2019 GSLS REQUIRED FORMS PACKET

Parents — Please read, complete, and return to the office all of the documents contained in this packet by the first day of the school year.

Thank you,

Mrs. Reva Simpson, Principal

Mrs. Angie Evans, Administrative Assistant



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2018-2019 FORM CHECKLIST

Student's Name _____ Date _____

Required Forms:

_____ Registration Form

_____ Emergency Card

_____ Financial Commitment Form

_____ Consent and Acknowledgement Signature Form

_____ Computer and Internet Usage Agreement

Forms Required When Applicable:

_____ Request for Bus Transportation — Bus Riders Only

_____ Copy of Certified Birth Certificate — New GSLS Students Preschool - 8th Grade

_____ Medical Exam Form — Preschool, Kindergarten, 2nd Grade, 6th Grade

_____ Dental Exam Form — Kindergarten, 2nd Grade, 6th Grade

_____ Vision Exam Form — Kindergarten

_____ Sports Permission Slip — 4th - 8th Grades

_____ Sports Physical Exam Form — 4th - 8th Grades

_____ Chromebook Agreement Form — 6th - 8th Grades



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2018-2019 REGISTRATION FORM

Student's Full Name: _____
(First) (M.I.) (Last)

Grade This Fall (K-8th): _____ Birth Date: _____

Preschool Class (Circle One): 4-year 5-day 4-year 3-day 3-year 5-day 3-year 2-day

Street Address: _____ City: _____ Zip: _____

Home Phone: _____ Father's Cell: _____ Mother's Cell: _____

Place of Birth (City/State): _____ Social Security # (optional): _____

Race: _____ Baptism Date: _____ Church Affiliation/Religion: _____

Public School District and School Name: _____

Previous School attended and grade level completed: _____

Father's Name: _____ Social Security #: _____

Address (if different than student): _____

Father's Email (Print): _____

Place of Work: _____ Work Phone #: _____

Mother's Name: _____ Social Security #: _____

Address (if different than student): _____

Mother's Email (Print): _____

Place of Work: _____ Work Phone#: _____

Parents (Check One): Married _____ Separated _____ Divorced _____ Deceased _____

List Names of Brothers/Sisters with Birth Dates: _____

~ PLEASE COMPLETE REVERSE SIDE OF FORM ~



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2018-2019 REGISTRATION FORM — PAGE 2

Stepfather's Name: _____ **Social Security #:** _____

Address: _____ **Cell#** _____

Place of Work: _____ **Work Phone#:** _____

Stepmother's Name: _____ **Social Security #:** _____

Address: _____ **Cell#** _____

Place of Work: _____ **Work Phone#:** _____

Family Doctor: _____ **Phone Number:** _____

Hospital Preference: _____

Allergies or Medical Conditions: _____

Insurance Carrier: _____ **Group/Policy #:** _____

Emergency Contact: _____ **Relationship:** _____ **Phone:** _____

OPTIONAL:

Paternal Grandparents Names: _____

Paternal Grandparents Email Address: _____

Maternal Grandparents Names: _____

Maternal Grandparents Email Address: _____

Student Name _____

Grade _____

In case of emergency, follow the numbered steps. (Number in order of Priority) 1-2-3, etc.

#	Phone #
_____ First Aid given by the Teacher	
_____ Contact Mother _____	_____
_____ Contact Father _____	_____
_____ Contact Family Dr. _____	_____
_____ Contact Relative _____	_____
_____ Contact Friend _____	_____
_____ Take Child to nearest Health Care Facility _____	

If I cannot be reached, I give my permission for my child to be transported to the nearest Health Care Facility for treatment.

Allergies:

Signature: _____

Please write any additional pertinent medical information about your child on the back of this card.

Student Name _____

Grade _____

In case of emergency, follow the numbered steps. (Number in order of Priority) 1-2-3, etc.

#	Phone #
_____ First Aid given by the Teacher	
_____ Contact Mother _____	_____
_____ Contact Father _____	_____
_____ Contact Family Dr. _____	_____
_____ Contact Relative _____	_____
_____ Contact Friend _____	_____
_____ Take Child to nearest Health Care Facility _____	

If I cannot be reached, I give my permission for my child to be transported to the nearest Health Care Facility for treatment.

Allergies:

Signature: _____

Please write any additional pertinent medical information about your child on the back of this card.



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2018-2019 FINANCIAL COMMITMENT FORM

The Board of Directors of the Tazewell Lutheran School Association has established the following fees for Good Shepherd Lutheran School for the 2018-19 school year.

Please initial each small line and sign this form at the bottom to indicate that you understand these fees and pledge your commitment to pay those fees that are applicable to your child/children. A copy of this completed form will be provided to you for your records.

TUITION AND REGISTRATION FEES

Tuition K - 8				Tuition Preschool	
No. of Children	Annual	10 Month	12 Month	Class	Monthly Amount
1 st Child	\$4,800.00	\$480.00	\$400.00	3yr 2 Day Half Day	\$150.00
2 Children	\$8,508.00	\$841.20	\$709.00	4yr 3 Day Full Day	\$285.00
Family (3+)	\$9,600.00	\$948.00	\$800.00	3yr 5 Day Full Day	\$400.00
Registration/Book Fee	\$280.00			4yr 5 day Full Day	\$400.00
Chromebook Fee (6-8 Grade)	\$100.00			Registration Fee	\$100.00

_____ Tuition is due on the 1st of each month and is considered delinquent by the 15th of the month. **A late fee of \$20 is assessed if payment is not made by the 15th.** I/We understand that if, after two months, there remains an unpaid tuition amount, that my/our child/children may be unable to continue attending GSLS.

_____ Registration fees are due at registration on August 1, 2018. I/We understand that if registration fees are not paid in full by the first day of school, that my/our child/children may be unable to continue attending GSLS.

LUNCH FEES

(Aramark may change these prices.)

Hot Lunch \$2.85/meal (includes milk)

Ala cart Entrée \$1.80

Extra Milk or milk with cold lunch \$ 0.55

Adult Entrée \$3.00

_____ I/We have read and understand the payment policy explained on the Lunch Procedure Form. I am / We are responsible for paying for my child/children's lunches.



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LATCHKEY FEES

(Tazewell County Health Department may change these rates.)

AM Latchkey — 6:30-9:00am	\$ 8.00 per child
PM Latchkey — 3:00-6:00pm	\$ 9.00 per child
Early Dismissal Days	\$15.00 per child

_____ I/We have read understand that we will pay the TCHD separately for our Latchkey needs for my/our child/children.

OTHER FEES

_____ I/We understand that there is a \$30 charge on all returned NSF checks.

_____ I/We understand that payments for Piano Lessons and any other extra-curricular activities will be paid in advance at the beginning of each month. If any amount is due at the end of the month, a statement will be generated with an immediate due date. Further lessons will not be given if there is an outstanding balance.

_____ I/We understand that a **2% convenience free** will be charged for all credit card payments. Good Shepherd now accepts all major US credit cards (Visa, MasterCard, American Express, Discover), Apple Pay and Android Pay.

_____ I/We, the undersigned, are individually and/or jointly responsible for my/our student(s) accounts with Good Shepherd Lutheran School. I/We understand that my/our account may be turned over for collections if balances remain unpaid.

Student Name(s) _____

Parent(s) or Guarantor(s) Signature

Name - Printed

Signature

Date

Name - Printed

Signature

Date



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2018 - 2019 Consent and Acknowledgement Signature Form

PARENTS — We require a separate Signature Form for each student. Please print your student's name at the top of this form and please sign and date each section as requested.

STUDENT'S NAME _____ **GRADE** _____

COVENANT RELATIONSHIP ACKNOWLEDGEMENT

As parents, we the undersigned by the grace of God, will strive to meet the requirements of the Covenant Relationship to the glory of God. We realize that the neglect of these requirements on our part may result in our child (named on Page 1) not being permitted to attend Good Shepherd Lutheran School. We hereby agree to fulfill the obligations and pledge our support to the teaching staff and administration.

Signature of Parent/Guardian _____ Date _____

_____ We are members of (CIRCLE ONE): St. John's-Green Valley, St. John's-Pekin, Trinity-Pekin

_____ We are interested in membership in one of the Missouri-Synod Lutheran churches in the Pekin area. Please ask the Pastor of _____ to contact us.

_____ We are members of the following church:

Church Name _____ Phone _____

Address _____ Pastor's Name _____



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MEDICAL CONSENT

I give my permission and/or consent to the personnel of Good Shepherd Lutheran School to secure and authorize such emergency medical care and/or treatment as my child (named above) might require while under the supervision of Good Shepherd Lutheran School personnel.

I also agree to pay the entire costs and fees contingent on any emergency medical care and/or treatment of my child as secured or authorized under this consent. I understand that school personnel will make every effort to notify me immediately in case of emergency.

Signature of Parent/Guardian _____ Date _____

INSURANCE WAIVER ACKNOWLEDGEMENT

Good Shepherd Lutheran School does not provide school insurance coverage for its students. Most families have coverage for their children through their own insurance provider; therefore, we require that you sign this waiver indicating that your insurance company will provide coverage in the case of emergency. Please also provide the school with the name of the insurance company and a phone number if possible in case of an emergency situation.

My insurance provider will provide coverage for my child, _____, (named above) in the event of an emergency.

Name of Insurance Provider _____

Phone Number of Provider _____

Signature of Parent/Guardian _____ Date _____

CONSENT FOR ACTIVITIES PARTICIPATION

I give my child (named on Page 1) permission to participate in all activities of Good Shepherd Lutheran School. I acknowledge that Activities will be listed in the school's newsletter.

Signature of Parent/Guardian _____ Date _____



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PARENT HANDBOOK ACKNOWLEDGEMENT

I acknowledge that I have received and read either the digital or printed version of the 2018-2019 Good Shepherd Lutheran School Parent Handbook. I agree with and will support the policies as written in the Handbook.

Signature of Parent/Guardian _____

Date _____

STUDENT HANDBOOK ACKNOWLEDGEMENT

To the best of my reading and comprehension levels, I have read either the digital or printed version of the 2018-2019 Good Shepherd Lutheran School Student Handbook or my parents have read and explained the Student handbook to me. I agree with and will support the policies as written in the Handbook.

Signature of Student _____
(Kindergarten through 8th Graders only)

Date _____

SOCIAL MEDIA POLICY ACKNOWLEDGEMENT

I acknowledge that I have received and read either the digital or printed version of the 2018-2019 Good Shepherd Lutheran School Social Media Policy. I agree with and will support the policy as written.

Signature of Parent/Guardian _____

Date _____

Signature of Student _____

Date _____

CONSENT FOR CONTACT INFORMATION RELEASE

Each year Good Shepherd Lutheran School's PTL committee distributes a School Directory which contains the names, addresses, and phone numbers for all parents, students and staff. I give my permission to have my family's contact information placed in the PTL 2018-2019 School Directory.

Signature of Parent/Guardian _____

Date _____



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CONSENT FOR PHOTO USAGE

I give my permission for my child (named on Page 1) to be photographed by Good Shepherd Lutheran School. I also give permission for the school to use and publish these photos for educational purposes.

Signature of Parent/Guardian _____

Date _____

CONSENT FOR INTERNET INFORMATION RELEASE

Good Shepherd Lutheran School has developed a web site and is now on line on the Internet. Photos of students involved in classroom and school sponsored activities may be used as part of the web site. Only first names will be used to identify individuals.

I give my permission to have my child's photograph and first name (child named on Page 1) used as part of the Good Shepherd web site.

Signature of Parent/Guardian _____

Date _____

PARENT - TEACHER - EASE INSTRUCTIONS ACKNOWLEDGEMENT

I acknowledge that I have received and read the Parent-Teacher-Ease Instructions. I agree that it is my responsibility to log in to my account so that I may check my child's academic progress, communicate with my child's teacher, review my balance due, etc.

Signature of Parent/Guardian _____

Date _____



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2018-2019 COMPUTER AND INTERNET USAGE AGREEMENTS **SIGNATURE PAGE**

PARENT SECTION

I give permission for my child to use the Internet at Good Shepherd Lutheran School. I understand that:

- 1) Teachers will do their best to monitor the computer stations; however, ultimately my child is responsible for appropriate use of the Internet.
- 2) The Internet is a valuable source of useful information, and the vast majority of Internet sites are perfectly safe; however, the Internet does contain material of a controversial nature which is inappropriate for children.
- 3) Good Shepherd Lutheran School has no control over the Internet and assumes no responsibility for the content of any Internet resources.

Parent's Signature _____ Date _____

STUDENT SECTION

In order to use the Internet at Good Shepherd Lutheran School, I understand and accept these terms:

- 1) I will not use the Computer Lab, the Internet, or any Good Shepherd computer without permission from my instructor.
- 2) I will only search for sites or topics assigned by an instructor during class time.
- 3) Since unwanted web sites may appear during my searches, I will report anything that appears to be suspicious or inappropriate to my instructor immediately.
- 4) I will be a responsible digital citizen as described in the Agreement.
- 5) I will use the technology available in appropriate ways only and avoid and report all inappropriate as described in the Agreement.
- 6) I may not use the Internet without this signed permission form on file at the school. Each year, this form will be signed and turned in to the school office or the lab teacher by the first day of school.
- 7) I understand that abuse of the Internet, the Computer Lab, or any Good Shepherd computer or other technology by me will result in consequences as described in this Agreement.

Student's Signature _____ Date: _____



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2018 2019 CHROMEBOOK LEASE AGREEMENT
FOR STUDENTS IN THE 6TH AND 7TH GRADES

This Agreement is entered into this _____ day of _____, 2018, between

GOOD SHEPHERD LUTHERAN SCHOOL, (hereinafter referred to as “Lessor”), and

_____ (hereinafter referred to as “Lessee”).

(Please print name of student’s parent or guardian.)

WITNESSETH:

In consideration of the mutual promises and covenants herein provided, the parties agree as follows:

ARTICLE 1

The Lessor does hereby lease to Lessee one Chromebook and one power cord/charger, and Lessee does hereby accept one Chromebook and one power cord/charger (for the use and benefit of the student Lessee has enrolled at Good Shepherd Lutheran School) under the terms and conditions set forth in this Agreement.

ARTICLE II

The term of this Lease shall be the 2018-2019 school year. This Lease shall commence on the date the Chromebook is distributed to the student. This Lease shall terminate on the last day of the 2018-2019 school year.

ARTICLE III

Lessor acknowledges receipt of the rent of Eighty Dollars (\$80.00) to secure Lessee’s performance hereunder. It is understood by Lessee that such rent is non-refundable. It is further understood that such payment of rent shall not preclude Lessor from receiving in addition thereto all damages suffered by reason of a violation by Lessee of any of the terms or conditions of this Lease up to an amount equal to the purchase price of a new Chromebook and/or power cord/charger and all attorneys’ fees for the collection thereof.

In the event the student the Lessee has enrolled at Good Shepherd Lutheran School graduates from Good Shepherd Lutheran School having completed three (3) such lease agreements, the Chromebook they have leased shall become the property of Lessee on the last day of their student's 8th grade year.

In the event the student the Lessee has enrolled at Good Shepherd Lutheran School graduates from Good Shepherd Lutheran School having completed two (2) annual lease agreements, Lessee shall have the option to purchase the Chromebook they have leased for Eighty Dollars (\$80.00) on the last day of their student's 8th grade year.

In the event the student the Lessee has enrolled at Good Shepherd Lutheran School graduates from Good Shepherd Lutheran School having completed one (1) annual lease agreement, Lessee shall have the option to purchase the Chromebook they have leased for One Hundred and Sixty Dollars (\$160.00) on the last day of their student's 8th grade year.

ARTICLE IV

Lessee covenants not to voluntarily cause or allow any waste, damage, disfigurement, or injury to the Chromebook and/or power cord/charger. Lessee shall immediately notify Lessor of any theft, loss, or damage to the Chromebook and/or power cord/charger. Lessee further agrees to notify local law enforcement in the event of theft or loss.

Once notified, Lessor shall make arrangements for the prompt repair or replacement of the Chromebook and/or power cord/charger. Lessee shall be solely responsible for the cost of replacement or any repairs not covered by product warranty.

ARTICLE V

Lessee agrees to permit Lessor and any of Lessor's authorized representatives the authority to inspect the Chromebook and/or power cord/charger at any time for the purpose of making any repairs or performing any other work.

ARTICLE VI

Lessee acknowledges receipt of the Chromebook Technology Policy adopted by Good Shepherd Lutheran School. Lessee agrees to supervise out-of-school usage of the Chromebook by the student to ensure student's out-of-school usage of the Chromebook complies with the rules and policies of Good Shepherd Lutheran School and all state, local, and federal laws, including, but not limited to, copyright laws.

ARTICLE VII

It is hereby agreed by and between the parties hereto that Lessee may not assign or in any matter transfer this Lease or any interest herein to any other person or persons.

ARTICLE VIII

Lessee agrees to indemnify and to hold harmless Lessor of and from any and all claims filed on behalf of any person or persons arising from any action by Lessee or Lessee's student while in possession of the Chromebook or from any default by Lessee or Lessee's student in performing any obligation under this Lease.

In the event action for the enforcement of this Lease is undertaken by Lessor due to Lessee's non-performance, Lessee shall pay and discharge all expenses incurred in any such enforcement action including reasonable attorneys' fees, costs and expenses incurred in connection with such enforcement action.

The parties agree any action for the enforcement of the Lease shall be brought in Tazewell County, Illinois.

ARTICLE IX

If any term or provision of this Lease or the application thereof to any person or circumstance shall to any extent be invalid or unenforceable, the remainder of this Lease for the application of such term or provision to persons or circumstances other than those as to which it is invalid or unenforceable shall not be affected thereby, and each term and provision of the Lease shall be valid and be enforced to the fullest extent permitted by law.

This Lease shall be construed and interpreted in accordance with the laws of the State of Illinois.

LESSEE:

LESSOR:

Signature of Parent or Guardian

Signature of Authorized Representative of
Good Shepherd Lutheran School

Printed Name of Parent or Guardian

Printed Name of Authorized Representative of
Good Shepherd Lutheran School

Printed Name of Student



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2018 2019 CHROMEBOOK LEASE AGREEMENT
FOR STUDENTS IN THE 8TH GRADE

This Agreement is entered into this _____ day of _____, 2018, between

GOOD SHEPHERD LUTHERAN SCHOOL, (hereinafter referred to as “Lessor”), and

_____ (hereinafter referred to as “Lessee”).

(Please print name of student’s parent or guardian.)

WITNESSETH:

In consideration of the mutual promises and covenants herein provided, the parties agree as follows:

ARTICLE 1

The Lessor does hereby lease to Lessee one Chromebook and one power cord/charger, and Lessee does hereby accept one Chromebook and one power cord/charger (for the use and benefit of the student Lessee has enrolled at Good Shepherd Lutheran School) under the terms and conditions set forth in this Agreement.

ARTICLE II

The term of this Lease shall be the 2018-2019 school year. This Lease shall commence on the date the Chromebook is distributed to the student. This Lease shall terminate on the last day of the 2018-2019 school year.

ARTICLE III

Lessor acknowledges receipt of the rent of Fifty Dollars (\$50.00) in addition to a security deposit of Thirty Dollars (\$30.00) to secure Lessee’s performance hereunder. It is understood by Lessee that such rent is non-refundable. However, any amount of the security deposit which is not applied by Lessor to satisfy obligations of Lessee herein shall be returned to Lessee after Lessee has returned the Chromebook and power cord/charger upon expiration of the Lease, and after Lessor has had an opportunity to inspect the Chromebook and power cord/charger and assess any damages. It is understood that no interest shall accrue on the security deposit. It is further understood that such deposit shall not preclude Lessor from receiving in addition thereto all damages suffered by reason of a violation

by Lessee of any of the terms or conditions of this Lease up to an amount equal to the purchase price of a new Chromebook and/or power cord/charger and all attorneys' fees for the collection thereof.

ARTICLE IV

Lessee covenants not to voluntarily cause or allow any waste, damage, disfigurement, or injury to the Chromebook and/or power cord/charger. Lessee shall immediately notify Lessor of any theft, loss, or damage to the Chromebook and/or power cord/charger. Lessee further agrees to notify local law enforcement in the event of theft or loss.

Once notified, Lessor shall make arrangements for the prompt repair or replacement of the Chromebook and/or power cord/charger. Lessee shall be solely responsible for the cost of replacement or any repairs not covered by product warranty.

ARTICLE V

Lessee agrees to permit Lessor and any of Lessor's authorized representatives the authority to inspect the Chromebook and/or power cord/charger at any time for the purpose of making any repairs or performing any other work.

ARTICLE VI

Lessee acknowledges receipt of the Chromebook Technology Policy adopted by Good Shepherd Lutheran School. Lessee agrees to supervise out-of-school usage of the Chromebook by the student to ensure student's out-of-school usage of the Chromebook complies with the rules and policies of Good Shepherd Lutheran School and all state, local, and federal laws, including, but not limited to, copyright laws.

ARTICLE VII

It is hereby agreed by and between the parties hereto that Lessee may not assign or in any matter transfer this Lease or any interest herein to any other person or persons.

ARTICLE VIII

Lessee agrees to indemnify and to hold harmless Lessor of and from any and all claims filed on behalf of any person or persons arising from any action by Lessee or Lessee's student while in possession of the Chromebook or from any default by Lessee or Lessee's student in performing any obligation under this Lease.

In the event action for the enforcement of this Lease is undertaken by Lessor due to Lessee's non-performance, Lessee shall pay and discharge all expenses incurred in any such enforcement action

including reasonable attorneys' fees, costs and expenses incurred in connection with such enforcement action.

The parties agree any action for the enforcement of the Lease shall be brought in Tazewell County, Illinois.

ARTICLE IX

If any term or provision of this Lease or the application thereof to any person or circumstance shall to any extent be invalid or unenforceable, the remainder of this Lease for the application of such term or provision to persons or circumstances other than those as to which it is invalid or unenforceable shall not be affected thereby, and each term and provision of the Lease shall be valid and be enforced to the fullest extent permitted by law.

This Lease shall be construed and interpreted in accordance with the laws of the State of Illinois.

LESSEE:

LESSOR:

Signature of Parent or Guardian

Signature of Authorized Representative of
Good Shepherd Lutheran School

Printed Name of Parent or Guardian

Printed Name of Authorized Representative of
Good Shepherd Lutheran School

Printed Name of Student



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2018-2019 SCHOOL YEAR **REQUEST FOR BUS TRANSPORTATION**

KINDERGARTEN - 8TH GRADE STUDENTS Students who live within the Pekin Grade School District 108 boundaries are eligible for bus transportation. Once the City of Pekin sets the routes and sends us the information, we will communicate to you the approximate morning pickup time the week before school starts. Please complete the form below if your child/children **WILL NEED** bus transportation; all children in your family may be listed on this one form.

Child/Children's name(s):

Address for bus pick-up: _____

Home Address (if different from above) : _____

Public School your children would attend: _____
(GSLs needs this information each year when we complete the form required by District 109)

Parent signature: _____ Date: _____



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2018-2019 SPORTS PARTICIPATION PERMISSION SLIP

Good Shepherd Lutheran School may offer the following sports: Volleyball, Basketball, Cheerleading, and Track.

Parental Support and Responsibilities:

All parents are expected to support their child's participation in any athletic program. This participation includes attendance at your child's sports event as well as the added responsibility of volunteering your time to maintain the service and operation of our athletic program. You will be contacted for opportunities to serve in a variety of ways. Such service on your part is the only way Good Shepherd Lutheran School can afford to sponsor this program for your child. We trust that you will cooperate with our staff.

The "Return-to-Play" Policy:

Any athlete suspected of suffering a concussion will be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. **The "Return-to-Play" Policy of Good Shepherd Lutheran School requires athletes to provide the school with written clearance from either a physician licensed to practice medicine in all its branches or a certified athletic trainer working in conjunction with a physician licensed to practice medicine in all its branches prior to returning to play or practice following a concussion or after being removed from an interscholastic contest due to a possible head injury or concussion and not cleared to return to that same contest.**

Medical Treatment Permission:

Please answer the three questions, complete the information requested, and sign the form.

1. If you cannot be reached in an emergency, and, if in the judgment of the teacher or coach in charge, immediate medical and/or hospital attention is indicated, do you authorize responsible authorities to take your son/daughter to an available hospital or physician?

Yes _____ No _____

2. Is your child under a doctor's care at this date? Yes _____ No _____

Additional Information or Comments:



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3. Is your child taking any type of medication? Yes _____ No _____

4. What is the date of your child's last tetanus shot? _____

Student's Name _____ Date of Birth _____

Home Phone # _____ Work Phone # _____

Emergency Contact Name _____ Emergency Phone # _____

2nd Emergency Contact _____ 2nd Emergency Phone # _____

Hospital Preference _____

Doctor's Name _____ Phone # _____

Insurance Company _____ Policy # _____

I give permission for my child _____ who is in Grade _____ to participate in the Good Shepherd Lutheran School sports program during the 2018-2019 school year.

Signature of Parent/Guardian _____ Date: _____