

**Good Shepherd Lutheran Church  
Lutheran Education Tuition Assistance Application**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent(s) \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

School Student(s) is attending: \_\_\_\_\_

School's Address \_\_\_\_\_

\_\_\_\_\_

\*\* All checks will be made out to and mailed to the school of attendance \*\*

As parent(s) we hereby pledge to:

- Maintain an active worship and study life, regularly participating in worship services and the Lord's Supper at Good Shepherd.
- Guide my (our) child(ren) in regular participation in worship services, and Christian Education programs at Good Shepherd.
- Maintain a healthy stewardship of time, talents and financial support at Good Shepherd.
- Have my (our) child(ren) attend confirmation classes and be confirmed at Good Shepherd (grades 5 – 8).

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Parent's signature

**All applications must be received by the church office by July 15th**