

Clarinda Lutheran School

Registration Packet

"Go into all the world and proclaim the Gospel to the whole Creation."

Mark 16:15

The Lord has blessed Clarinda Lutheran School in many wonderful ways. We're thankful that you are one of those blessings by being a part of this educational ministry in Clarinda, Iowa.

This 2021-2022 registration packet has been put together for your convenience to fill out at home where all of your records are kept.

Registration Dates

In person registration will be held on Monday, August 9th – Wednesday, August 11th between the hours of 9 a.m. – 3 p.m. If you are unable to come during these hours, please contact Mrs. Marcum or you can put your paperwork in the mailbox. If you will be out of town during these dates, please drop-off your paperwork before August 9th.

Back to School/PTL Picnic

The Back to School/PTL Picnic will be on Sunday, August 22nd from 5:30 – 7:00 p.m.

5:30 p.m.	Welcome, Mr. John Mainquist
5:45 – 6:30 p.m.	PTL Picnic
5:45 – 6:00 p.m.	Kindergarten Parent Meeting
5:45 – 7:00 p.m.	Open House

You may bring your school supplies to drop-off in your classrooms during Open House.

First Day of School

The first day of school is Tuesday, August 24th. School will begin at 8:05 a.m. School will end at 1:30 p.m. Busses will not be running on the first day of school, this will be a parent transport day. Busses will start running on Wednesday, August 25th. If you need bus information, please call the Clarinda Superintendent's office. The phone number is 542-5165.

Please see the Registration Check List for the forms to be completed for registration. If you have any questions or concerns, please contact Mrs. Marcum at 712-542-3657 or via e-mail: smarcum@cls.k12.ia.us

All signed forms must be turned in and the registration fee paid to attend class on the first day of school, August 24, 2021.

Clarinda Lutheran School

Registration Check List 2021-2022

FORMS WHICH APPLY TO ALL FAMILIES **(one per family):**

- ☐ Cover Letter & Registration Check List
- ☐ Chapel Family T-shirt Order Form
- ☐ Parent Contact / Emergency / Health Form
- ☐ Parent-Student Handbook
- ☐ Handbook Support & Media Release Form
- ☐ Textbook Services Request Form
- ☐ Field Trip & Medical Treatment Consent Form
- ☐ Transportation Designation Form
- ☐ PTL Picnic Form

INDIVIDUALIZED FORMS (available during Registration on table in front lobby)

- ☐ Athletic Physical Exam Form (grades 7/8) – original to CLS; we will get copies to CMS
- ☐ Concussion Form for 7 & 8 athletics
- ☐ Application for Admission (new students only)
- ☐ CHS Transcript Release Form (8th grade only)
- ☐ Transfer Record Form (for new students in grades 1-8 transferring from another school)
- ☐ Transportation Reimbursement Forms (for those living outside of the Clarinda School District). You will need to fill out two forms, one per semester and take them to the appropriate school for reimbursement.

Checks may be made out to:

CLARINDA COMMUNITY SCHOOLS

For Lunch Accounts or
Student Activity Cards

CLARINDA LUTHERAN SCHOOL

For the Enrollment Fee & Tuition

ADDITIONAL INFORMATION ENCLOSED

- ☐ School Calendar (1-page)
- ☐ School Supply List

ADDITIONAL INFORMATION TO BE **AVAILABLE during or by the 1st Day of** **School:**

- ☐ Class Information & Schedules
- ☐ CLS School Wall Calendar
- ☐ CLS Athletic Program/Schedules (grades 6-8)
- ☐ Free/Reduced Lunch Form (to be turned in to Clarinda High School)
- ☐ Various Pamphlets of Interest
- ☐ Volunteer Opportunities

ON REGISTRATION DAY:

- _____ Turn in the appropriate forms listed
- _____ Pay \$100 Enrollment New Students
- _____ Pay \$100 Re-enrollment Fee (if not paid to-date)
- _____ Turn in Certificate of Immunization (Kindergarten & students new to CLS)
- _____ Turn in a copy of child's Birth Certificate and Dental Screening Form (grade K only)

FIRST DAY OF SCHOOL:

All registration paperwork & registration fee must be paid by the first day of school.

LUNCH PRICES

Student Lunches will be free again this school year

Student Milk - \$.30 each

Adult Lunches - \$3.95 each



Chapel Tee Shirts 2021-2022

Chapel families will again be wearing special tee shirts with the 2021-2022 school theme: *"Go into all the world and proclaim the Gospel to the whole creation"* **Mark 16:15**

Students will receive these shirts at no cost. The PTL and Student Activity Fund will pick up the cost.

Parents may purchase a Chapel Shirt for themselves, siblings, grandparents, etc. Cost will be \$10.00 for all Youth sizes & Adult in sizes S, M, L & XL. \$13.00 for Adult sizes larger than XL. Please include payment with your order.

Name_____ Size_____

Name_____ Size_____

Name_____ Size_____

Name_____ Size_____

Name_____ Size_____

Name_____ Size_____

Name_____ Size_____

Name_____ Size_____

Please specify Youth or Adult size for ALL shirts (i.e. YXS; YL; AS; AXXL, etc.)

Youth XS (2-4)

Youth S (6-8)

Youth M (10-12)

Youth L (14-16)

Adult S

Adult M

Adult L

Adult XL

Adult XXL (+3.00)

Adult XXXL (+3.00)

Please return with your registration materials.

CLARINDA LUTHERAN SCHOOL
Parent Contact / Emergency / Health Information Form 2021–2022

Information with an * will be printed in the family directory which each school family receives.

*Parent(s) Name _____

*Complete Address _____

*Home Phone Number _____

*E-mail Address(s) (home) _____

- ☐ Yes, you may print my e-mail address in the Family Directory.
☐ No, please do not print my e-mail address in the Family Directory.

E-mail Address(s) (work) _____

Father's Place of Business & Phone Number _____

Mother's Place of Business & Phone Number _____

Work email/numbers **will not** be printed in the Family Directory (will only be used by staff when needed)

*Cell Phone Numbers _____

*Child's Name _____	*Grade this fall _____
_____	_____
_____	_____
_____	_____

#1: Emergency Contact Name (and relationship) _____
Phone Number(s) _____

#2: Emergency Contact Name (and relationship) _____
Phone Number(s) _____

If you need more room for any of the following, please use the back of this form:

Doctor's Name _____

Location of Office _____ Phone Number _____

Dentist's Name _____

Location of Office _____ Phone Number _____

If your child(ren) wear glasses or contact lenses, please fill out the information below:

Optometrist _____

Location of Office _____ Phone Number _____

Allergies _____

Medications taken regularly _____

Please list any other medical, social, emotional needs/conditions which you feel the school should be aware of:

**CLARINDA LUTHERAN SCHOOL
PARENT SUPPORT STATEMENT
2021 – 2022**



I have read the contents of the Clarinda Lutheran School Handbook giving special attention to the spiritual life expectations, parent/school family expectations and the discipline/supervision sections.

I have discussed the student expectations, academic concerns and discipline/supervision sections with my child(ren).

I will support the policies and guidelines set forth in the handbook.

I will with the help of God do my best to promote and support the school and it's Christian Ministry.

I sign this agreement in good conscience and with honest intent.

Mother's signature _____ Date _____

Father's signature _____ Date _____

**Clarinda Lutheran School
Media Release Permission Form
2021 - 2022**

I give permission for Clarinda Lutheran School to release news articles and/or pictures (of less than seven people) which contain or mention my child(ren).

This includes newspapers, CLS website and Facebook page, The Lutheran Witness and possibly other magazines, local radio and TV stations.

Parents Signature _____ Date _____

Parents Printed Name _____

Clarinda Lutheran School receives state money for the purchase of textbooks. This covers a small percentage of our needs but it is helpful. Thank you for taking the time to fill this out.

CLARINDA COMMUNITY SCHOOL DISTRICT

2021-2022 TEXTBOOK SERVICES REQUEST

I, _____, hereby request textbook
(Parent's name)

services as the parent or guardian of the following named children who will be attending Clarinda Lutheran School for the upcoming school term.

1. _____
2. _____
3. _____
4. _____

<https://www.legis.iowa.gov/docs/code/301.pdf>

2. Textbooks adopted and purchased by a school district shall, to the extent funds are appropriated by the general assembly, be made available to pupils attending accredited nonpublic schools upon request of the pupil or the pupil's parent under comparable terms as made available to pupils attending public schools. If the general assembly appropriates moneys for purposes of making textbooks available to accredited nonpublic school pupils, the department of education shall ascertain the amount available to a school district for the purchase of nonsectarian, nonreligious textbooks for pupils attending accredited nonpublic schools. . . . The costs of providing textbooks to accredited nonpublic school pupils as provided in this subsection shall not be included in the computation of district cost under chapter 257, but shall be shown in the budget as an expense from miscellaneous income. Textbook expenditures made in accordance with this subsection shall be kept on file in the school district. In the event that a participating accredited nonpublic school physically relocates to another school district, textbooks purchased for the nonpublic school with funds appropriated for purposes of this chapter shall be transferred to the school district in which the nonpublic school has relocated and may be made available to the nonpublic school. Funds distributed to a school district for purposes of purchasing textbooks in accordance with this subsection which remain unexpended and available for the purchase of textbooks for the nonpublic school that relocated in the fiscal year in which the funds were distributed shall also be transferred to the school district in which the nonpublic school has relocated.

3. As used in subsection 2, "textbooks" means any of the following:

- a. Books and loose-leaf or bound manuals, systems of reusable instructional materials or combinations of books and supplementary instructional materials which convey information to the student or otherwise contribute to the learning process.
- b. Electronic textbooks, including but not limited to computer software, applications using computer-assisted instruction, interactive videodisc, and other computer courseware and magnetic media.
- c. Laptop computers or other portable personal computing devices which are used for nonreligious instructional purposes only.

(signature)

(date)

(address)

**CLARINDA LUTHERAN SCHOOL
FIELD TRIP CONSENT FORM
2021 - 2022**

Students Name: _____ **Grade** _____

Students Name: _____ **Grade** _____

Students Name: _____ **Grade** _____

Students Name: _____ **Grade** _____

have my permission to take part in class trips and outings where the location is away from school. Travel will be by school bus or personal vehicles. It is my understanding that the teacher will send home information regarding each trip outside of the Clarinda area.

Parent Signature: _____ **Date:** _____

**EMERGENCY/MEDICAL TREATMENT CONSENT FORM
2021 – 2022**

Students Name: _____ **Grade** _____

Students Name: _____ **Grade** _____

Students Name: _____ **Grade** _____

Students Name: _____ **Grade** _____

If the school is unable to reach me, I hereby authorize the school to call the physician indicated on the Parent Contact & Emergency Information form. The school is to follow his or her instructions.

If the physician is unable to be contacted, I realize the school personnel will make whatever arrangements seem necessary.

In an emergency, I hereby give permission to the licensed physician to hospitalize; secure proper treatment; examine; and in case of life-threatening conditions, apply anesthesia and/or surgery for my child(ren) named on this consent form.

Parent Signature: _____ **Date:** _____

Parent Printed Name: _____

TRANSPORTATION DESIGNATION FORM 2021-2022

One form can be used for each family, if all children have the same transportation procedure (otherwise use one for each student).

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Parent's Names: _____

Please plan with your child the nearest route to your home or to the sitter's home and ask that he/she use that route.

Unless I notify Clarinda Lutheran School by note or by phone to do otherwise:

REGULAR DISMISSAL:

_____ My child is to come home after school.

_____ My child goes regularly to a sitter.

Sitter's name: _____

Sitter's address: _____

Sitter's phone number: _____

_____ Other: _____

HOW TO GET HOME OR TO SITTER'S AFTER SCHOOL

_____ My child rides the shuttle bus to Clarinda Middle School

_____ My child rides a rural bus

_____ My child walks from Clarinda Lutheran School

_____ My child will be picked up by parents or _____

_____ Other: _____

IF IT SHOULD BECOME NECESSARY TO DISMISS SCHOOL EARLY BECAUSE OF WEATHER OR OTHER EMERGENCIES:

_____ My child is to follow his/her usual procedure for leaving school.

_____ My child is to go to:

Name: _____

Relationship: _____

Address: _____

Phone: _____

LEGAL DOCUMENTATION:

These forms need to be on file in the school office for the school to intervene and to deny individuals (i.e. relatives or non-custodial parent) the right to pick up or transport the student.

Signature _____ Date _____

Back to School Night/

PTL

Sunday, August 22nd

5:30 – 7:00 p.m.

Clarinda Lutheran School

Come and meet our new faculty, students and families. Reconnect with returning students, families, faculty and staff. Bring your school supplies.

5:30 p.m.

Welcome, Mr. John Mainquist

5:45 – 6:30 p.m.

PTL Picnic

5:45 – 6:00 p.m.

Kindergarten Parent Meeting

5:45 – 7:00 p.m.

Open House

Please let us know by email if your family will be able to join us for this event by Monday, August 16th in order to give the PTL planners some idea how much food to prepare. If you find your plans change but you didn't sign up, come anyway! They will prepare for extras!

We plan to attend the picnic.

There will be _____ adults and _____ children.

We will not be able to attend.

Name: _____
(please print)