Dear Parents and Supporters of Peridot-Our Savior’s Lutheran School,

By signing this form, you give us your intent to enroll the students written below.

** PLEASE NOTE—this does not guarantee a spot, but does give us a great advantage in our planning for next year.**

Further papers in the Registration Packet will be available at a later date. Thank you!

Signature: __________________  Your Printed Name: __________________

Date: ______________________

Phone Number(s): ______________________________

Student’s Name(s): ____________________________

Grade Level(s) next year: ________________________

Please do not hesitate to contact Benjamin Pagel with any questions.
School—(928) 475-7537    Home—(928) 475-4904

Please return this signed form back to school. Thank you!