



Resurrection Lutheran School
100 Lochmere Drive West Cary, NC 27518 (919) 851-7270

Letter of Intent 2012/2013 Academic Year

Please return this form with your non-refundable
Registration Fee of \$125.00 per family by January 12, 2012.

Student's Name: _____

Student's Name: _____

Student's Name: _____

Student's Name: _____

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

Date: _____

_____ We plan to attend Resurrection Lutheran School for the 2012/ 2013 academic year. Attached is my Registration Fee.

_____ We DO NOT plan to attend Resurrection Lutheran School for the 2012/2013 academic year.

_____ We plan to enroll a sibling _____, at Resurrection Lutheran School for the 2012/2013 academic year in grade _____.
(Application packets are available in the school office or under the Admissions tab at www.rlscary.org)

_____ We plan to apply to the Scholarship Committee for tuition assistance for the 2012/2013 academic year. (Information will be forwarded to you by the school office.)