



Grace

LUTHERAN CHURCH
& SCHOOL

Proclaiming. Connecting. Growing.

Tuition Referral Form

Referring Family:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____

Church Affiliation: _____

Method of Reimbursement:

- Tuition credit to current school family account
 - Donation to the general scholarship fund
 - Donation to community congregation scholarship fund
 - Tithe/Offering Donation to Grace Lutheran Church
 - Check rebate
-

Family being referred:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____

Student(s) name: _____

Grade(s): _____

Church Affiliation (if any): _____

Referring family to turn in to school office.