



SAINT HERMAN OF ALASKA Christian School

an Eastern Orthodox Parish School of the Holy Resurrection Orthodox Church

Re-Enrollment Form

I hereby request the re-enrollment of the following student(s) for the upcoming academic year.

Student 1: _____ Date of Birth: _____

Student 2: _____ Date of Birth: _____

Student 3: _____ Date of Birth: _____

Parent signature: _____ Date: _____

A nonrefundable **registration fee** of **\$50** and a **\$250 deposit** must be paid by **April 30**, *for each child* to ensure placement for September.

I will pay the registration fee and deposit by: • Check: _____

Make checks payable to Holy Resurrection Orthodox Church and indicate “Saint Herman School” in the memo line.

- Cash: _____ **Do not send cash through regular mail.** Cash payments must be deposited in the locked boxes located at the school’s premises.

This form should be submitted by email to tudor@sainthermanschool.org or by mail to *Saint Herman School, 62 Harvard Ave., Allston, MA, 02134* no later than **April 30**.