



GREENWOOD MENNONITE SCHOOL

2026-2027 REGISTRATION FORM – Part 1

Dear Parents,

To register your child(ren) for the 2026-2027 school year at GMS, please complete this form and return it to the office with payment. **Returning families who register by February 2, 2026 will be charged \$150/student.** Payment of the Registration Fee assures your child a place in the school for the new school year. This fee is non-refundable.

GMS requires that past due accounts be paid in full before a student begins the new school year at GMS. **Copies of Birth Certificate and Health records of immunizations are required for all new students. Submit those along with this form.**

Parents: _____

Address: _____
City State Zip

Mom's Contact info: _____
Phone # E-mail

Dad's Contact info: _____
Phone # E-mail

Home Church: _____

Pastor's Name: _____ Pastor's Phone Number _____

Student's Name (First/Middle/Last)	Entering Grade	Student's Birthday	Student's Cell Phone Number (if applicable)

**If registering a Pre-K student, please circle which class, PreK3 or PreK4, and how many days they will be in attendance each week, 2 day [T/Th], 3 day [MWF], or 5 day.*

Class (circle one): PreK3 PreK4 Days (circle one): 2 day 3 day 5 day

2026-2027 Registration Fee

Registration Type

Returning Family – Early Registration
New Family & Spring Registration
Summer Registration
Part Time PreK – 2 or 3 days

Due Date

February 2, 2026
June 6, 2026
August 15, 2026

Amount

\$150/student
\$200/student
\$250/student
\$100/student

For Office Use: Due: _____

Date Paid: _____ Ck#: _____

Parent's Signature: _____

See other side please ▶ ▶ ▶



GREENWOOD MENNONITE SCHOOL

2026-2027 REGISTRATION FORM – Part 2 (Returning Families Only)

Please complete Sections 1 and 2 of this form and have your pastor complete Section 3 before returning this to the school.

Parent name(s) _____

Section 1 - Parent Agreements (as stated in the Parent/Student Handbook):

- ____ I (We) have read and affirm the GMS Statement of Faith.
- ____ I (We) regularly attend church services (3 weeks each month except for illness, travel, etc.)
- ____ I (We) have read, understand, and agree to respect the GMS Philosophy and Position Statements.
- ____ I (We) abstain from sexual activity outside of traditional Biblical marriage.
- ____ I (We) reject hatred, slander, gossip, and derogatory racial and ethnic comments.

Signature(s) _____

Date _____

Printed Name(s) _____

Section 2 – Middle and High School Student Agreements (Grades 5-12 only):

Do you personally desire to attend GMS and agree to cooperate with school policies?

First student:	YES	NO	Signed: _____
Second student:	YES	NO	Signed: _____
Third student:	YES	NO	Signed: _____

Section 3 - Church Leader Verification:

Church Leader Verification

Church Name _____

Church Address _____

Leader's Name _____ Phone _____ Circle one: Pastor / Church Officer

To the best of my knowledge, does the parent(s) listed above:

Yes No

- ____ ____ Participate in the church or fellowship where you are pastor (or leader)?
- ____ ____ Attend services at least three weeks each month (except for illness, travel, etc.)?
- ____ ____ Abstain from any sexual activity outside of traditional Biblical marriage?
- ____ ____ Reject hatred, slander, gossip, and derogatory racial and ethnic comments.

Leader's Signature _____ Date _____