

EASTERN DISTRICT SCHOOL INFORMATION FORM

School Name _____

Church Name _____

Street Address _____

City _____ State _____ Zip _____

Year Founded _____ Grades/Ages _____

Principal/Director _____

Pastor _____

Website _____

School Mascot _____

Current Enrollment _____

Mission/Vision Statement

Fun Facts About Our School

Please return completed form and a photo of the school or students to Ruth Marzano at ruth.marzano@lcmsed.org or mail to:

*LCMS Eastern District
ATTN: Ruth Marzano
5111 Main Street
Williamsville, NY 14221*