

2018/2019 REGISTRATION FORM

Grade_____ Section_____

Walker_____ Bus _____ Latchkey_____

Parent Drop Off/Pickup_____

First Name_____ Middle Name_____ Last Name_____

Address_____ City_____ Zip_____

Social Security Number_____ - _____ - _____ Phone #_____ (check here if unlisted_____)

Date of Birth____/____/____ Place of Birth (City/County)_____ (State)_____

Mother's Maiden Name: _____

Sex: Male__ Female__ Race: Asian__ Black__ Hispanic__ Native American__ White__ Other__

Please check the appropriate box below and complete the information indicating only those relatives that the child lives with:

(Lives with) Father's Name_____ Employer_____ Phone #_____

(Lives with) Mother's Name_____ Employer_____ Phone #_____

(Lives with) Stepparent's Name_____ Employer_____ Phone #_____

(Lives with) Other_____ Employer_____ Phone #_____

Parent/Guardian's e-mail address_____ Parent/Guardian's Cell Phone_____

Is either Parent/Guardian a member of the U.S. Armed Forces? Yes or No

Is either Parent/Guardian deployed or expect to be deployed in the next year? Yes or No

List all medication and health conditions (For example, allergies, medication needed during school hours, etc) below:

Family Physician_____ Phone #_____ Preferred Hospital_____ Medicare #_____

Insurance Information_____

Alternate Persons to be notified in case of accident/illness and may be released to:

1) Name_____ Relationship to student_____ Phone #_____

2) Name_____ Relationship to student_____ Phone #_____

3) Name_____ Relationship to student_____ Phone #_____

What school and city/state did he last attend?

Other children living in the home

Name_____ Age _____ Name_____ Age _____

Name_____ Age _____ Name_____ Age _____

I request that my child be eligible to participate in the State textbook loan program at no cost. Yes____ No____

I give permission for my child's photo/name to be released in publications. Yes____ No____

I give permission for my child to participate in counseling services. Yes _____ No _____

Signature of Parent_____ Date_____

-- FOR OFFICE USE ONLY --

TEXT BOOK \$90.00	LOCK FEE \$4.00	GYM SUIT \$15.00	TOTAL	COMPLIANCE

A DISCOUNT OF \$5.00 IF REGISTRATION IS COMPLETED AND FEES PAID ON JULY30th