To enroll your child for ANY services, we will need the following documentation:

- Birth Certificate or other documentation indicating date of birth
- Proof of residency (closing papers/lease agreement, current tax bill or current gas/electric bill)
- Custody papers (if applicable)
- Immunization history
- Registration form completed in its entirety

**Student Information**

**Student Name:**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle</th>
</tr>
</thead>
</table>

- Male
- Female

**Preferred Name:**

Date of Birth:

(xx/xx/xxxx)

**Address:**

<table>
<thead>
<tr>
<th>Street</th>
<th>City/Town</th>
<th>Zip</th>
</tr>
</thead>
</table>

Is the student a citizen of the United States?   Yes  No

If the student was not born in the United States, when did the student enter the United States?  

How many years has the student attended school in the United States?  

Is this student registering school for the first time?  Yes  No

If no, where did the student last attend school?  

Is the child hispanic or latino?  Yes  No

What is the child's ethnicity? (Please check one)

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Hispanic
- Black, not of Hispanic origin
- White, not of Hispanic origin

Special services needed: (Please check all that apply)

- Current IEP
- 504
- ESL (English as a second language)
- Occupational Therapy
- Physical Therapy
- Speech
- Other: ____________________________
Parent/Guardian 1:
Name: ____________________________
Address: ____________________________
Phone: (home) ______________________ (work) ______________________ (cell) ______________________
Email: ____________________________ Relationship to child: ____________________________
I would like to receive mailings for this student:
☐ Yes  ☐ No
Has this parent/guardian been employed in temporary or seasonal agricultural work/activities?
☐ Yes  ☐ No

Parent/Guardian 2:
Name: ____________________________
Address: ____________________________
Phone: (home) ______________________ (work) ______________________ (cell) ______________________
Email: ____________________________ Relationship to child: ____________________________
I would like to receive mailings for this student:
☐ Yes  ☐ No
Has this parent/guardian been employed in temporary or seasonal agricultural work/activities?
☐ Yes  ☐ No

Student currently resides with: (Court Documents are required for custody rights and legal alerts.)
☐ Both parents  ☐ Mother  ☐ Father  ☐ Legal Guardian  ☐ Other: __________

Emergency Contact 1: (Alternate-Parent/Guardians will be contacted first).
Name: ____________________________
Address: ____________________________
Phone: (home) ______________________ (work) ______________________ (cell) ______________________
Email: ____________________________ Relationship to child: ____________________________
Allowed to pick child up from school?  ☐ Yes  ☐ No
## Guardian/Family Information

### Emergency Contact 2: (Alternate-Parent/Guardians will be contacted first)

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Phone: (home) __________ (work) __________ (cell) __________

Email: __________

Relationship to child: __________

Allowed to pick child up from school?  ☐ Yes  ☐ No

### Babysitter/Daycare Provider

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Phone: (home) __________ (cell) __________

When will this child go to daycare?  ☐ Before school  ☐ After school  ☐ Both

### Sibling 1:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Gender:  ☐ Male  ☐ Female</th>
<th>D.O.B.: __________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to Student: __________

Grade: __________

School Attending: __________

Address: (if different from student) __________

### Sibling 2:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Gender:  ☐ Male  ☐ Female</th>
<th>D.O.B.: __________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to Student: __________

Grade: __________

School Attending: __________

Address: (if different from student) __________

### Sibling 3:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Gender:  ☐ Male  ☐ Female</th>
<th>D.O.B.: __________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to Student: __________

Grade: __________

School Attending: __________

Address: (if different from student) __________

### Sibling 4:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Gender:  ☐ Male  ☐ Female</th>
<th>D.O.B.: __________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to Student: __________

Grade: __________

School Attending: __________

Address: (if different from student) __________