

Sand Ridge Charter School

Registration Form
School Year: 2018-2019

_____ New Registration _____ Re-Registration

PARENTS: THE INFORMATION ON THIS FORM IS NEEDED SO THAT WE WILL BE ABLE TO PROVIDE SERVICES AND CARE. PLEASE FILL OUT THE ITEMS ACCURATELY AND COMPLETELY.

Students legal name (Last, First, Middle) Students preferred name (if applicable)

_____/_____/_____
Grade M/F Birth date _____
Birth Place (City/State) E-mail

Resident Address City, State Mailing Address (if different)

Home Phone Mom Cell Phone Dad Cell Phone

Mother/Guardian Name (Last, First, Middle) Mother's maiden name **Living with Yes ___ No ___**

Mother/Guardian Employer Occupation Work Phone (extension if applicable)

Father/Guardian Name (Last,First, Middle) **Living with Yes ___ No ___**

Father/Guardian Employer Occupation Work Phone (extension if applicable)

School Last Attended _____ Resident School _____

EMERGENCY CONTACT – OTHER THAN PARENT/GUARDIAN

This information is needed in case of an emergency/varied situations in which you may not be able to be reached.

The person you select is given authority to:

1. Authorize the school to release your student if we are unable to contact you.
2. Direct the school in the handling of an emergency involving your child.

Name: _____ Phone: _____ Relation: _____

Name: _____ Phone: _____ Relation: _____

Name: _____ Phone: _____ Relation: _____

Name: _____ Phone: _____ Relation: _____

ALL CHILDREN LIVING AT HOME:

Name: _____ Date of Birth: _____ School: _____

Name: _____ Date of Birth: _____ School: _____

Name: _____ Date of Birth: _____ School: _____

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