

Online Registration Form

Student Data

Please review and correct the student information below.

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|--|--|---------------------------------|
| First Name: | Middle Name: | Last Name: |
| Mailing Address: | | |
| Grade Level: | Birth Date: | Birth Place: |
| Gender: | Primary Home Language: | Birth Country: |
| Disability: | IDEA Services: | Acceptable Use Policy on File?: |
| Allow publicity photo on website?: | Allowed to visit park with supervision?: | Transportation Code: |
| Ethnicity (Please check one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | Race (Please check all applicable) <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | |

Please indicate any court-imposed restrictions or general alert (non-medical) information concerning your child:

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| General Alerts: |
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Contact Data

Please review and correct the contact information below. Home and Cell numbers will be added to SchoolMessenger.

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| Contact Relationship: | Name: | |
| Home Phone: | Work Phone: | Cell Phone: |
| Address: | | |
| Can Pick Up Student?: | Email Address: | |

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|-----------------------|----------------|-------------|
| Contact Relationship: | Name: | |
| Home Phone: | Work Phone: | Cell Phone: |
| Address: | | |
| Can Pick Up Student?: | Email Address: | |

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