



# HOMESTEAD School



## Student Registration Form

**Record For:**

### Student Details

**PLEASE FILL IN ONE STUDENT PER FORM**

**Parent 1 Name:** Mother Test

**Parent1 Address:** 1 Main Street Main City AL \_\_\_\_\_

**Parent 2 Name:** \_\_\_\_\_

**Parent2 Address:** \_\_\_\_\_

**Student Name:** Johnny \_\_\_\_\_ Test

**Please select the Grade your child 1**

**will be in.:**

**Gender:** Male

**Date of Birth:** 12/25/2011

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Child lives with::** Both Parents

**Name of step parents:** \_\_\_\_\_

**Lives With - Others:** \_\_\_\_\_

**Religion:** Catholic

**Ethnicity:** Not Hispanic/Latino

**Race:** African American

**School last attended:** \_\_\_\_\_

**Who should receive school** Both parents

**correspondence?:**

**Are there any health concerns we Yes**

**should be aware of:**

**In the event of a serious accident or illness concerning my child, I understand that the school will try to contact me using the information supplied above. If the school cannot reach me, I hereby authorize the school to contact the doctor indicated above and follow his/her instructions. If the doctor cannot be reached, I then authorize the school to take whatever steps and make whatever arrangements they deem necessary for the health, safety and comfort of my child.**

**Do you authorize?:** Yes

With shared custody, both parents should complete the form.

**Parent 1/Guardian Name:** I Agree Mother Test 01/18/2016

**Parent 2/Guardian Name:** \_\_\_\_\_