



# Registration Card

CHILDREN IN FAMILY IN ORDER OF BIRTH INCLUDING THIS CHILD		
Name	Sex	Birthdate

My Child will go to and from school:	Walk Bicycle Family Car Car Pool School Bus Public Transportation	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Where child is to go regularly after school: (Parent's request or note needed for any change) _____			

<b>TRANSFER STUDENTS ONLY:</b>				
School last attended: _____				
Address	Street	City	State	Zip
Grade Completed _____				
<b>Note:</b>				
<i>Grade placement of transfer pupils is tentative until official transcript and records are received from last school.</i>				

**We agree to abide by the regulations of the school and pledge our full cooperation.**

	<b>Student</b>	<b>Date</b>
<i>Signed</i>	_____	_____
	<b>Parent or Guardian</b>	<b>Date</b>
<i>Signed</i>	_____	_____