

MARTIN ELEMENTARY SCHOOL
REGISTRATION FORM 2009-2010

Date Entered _____

Teacher _____

Grade _____

Last

First

Middle

STUDENT'S NAME _____ SEX M F

(As on Birth Certificate-No Nicknames)

ADDRESS _____ COPY S.S. CARD # _____

CITY _____ STATE _____ ZIP _____ D.O.B. _____ COPY BIRTH CERT. # _____

RACE: (Circle one) AMERICAN INDIAN WHITE PACIFIC ISLANDER BLACK/AFRICAN AMERICAN ASIAN HISPANIC

FATHER'S NAME _____ HOME PHONE _____ CELL # _____

EMPLOYER _____ WORK PHONE _____ E-MAIL _____

MOTHER'S NAME _____ HOME PHONE _____ CELL # _____

EMPLOYER _____ WORK PHONE _____ E-MAIL _____

GUARDIAN (If different) _____ HOME PHONE _____ CELL _____

EMPLOYER _____ WORK PHONE _____ E-MAIL _____

NAME OF PERSON(S) WITH WHOM CHILD LIVES: MOTHER _____ FATHER _____

STEPPARENT _____ GRANDPARENT _____ GUARDIAN _____

LIST (2) PERSONS IN CASE OF EMERGENCY: (Other than parents or guardian)

(1) _____ Ph. # Home _____ Work _____ Cell _____

(2) _____ Ph. # Home _____ Work _____ Cell _____

LIST ANY PHYSICAL DEFECTS OR MEDICAL CONDITIONS _____

MAY YOUR CHILD TAKE TYLENOL OR MOTRIN _____ YES _____ NO SIGNATURE _____

DOES CHILD TAKE MEDICATION DAILY? _____ IF YES-LIST _____

LIST ANY KNOWN ALLERGIES _____

VERY IMPORTANT Please circle primary way to go home

BUS # _____ A.M. # _____ P.M. CAR BASP WALK

Any time there is a change different from the primary way to go home, the student must bring a note to his/her teacher. WE WILL NO LONGER ACCEPT PHONE MESSAGES, WHICH PERTAIN TO HOW YOUR CHILD WILL GO HOME IN THE AFTERNOON. A student will go home his/her primary way unless a note is provided.

ANY SIBLINGS IN WEAKLEY COUNTY SCHOOLS:

_____ GRADE _____ SCHOOL _____ GRADE _____ SCHOOL _____

(NEW STUDENTS ONLY)

HAVE YOU EVER ATTENDED A SCHOOL IN WEAKLEY COUNTY _____ IF YES, WHERE _____ Grade _____