

HAMILTON CCSD #328 REGISTRATION FORM

STUDENT INFORMATION:

Grade: _____ () Male () Female

Student Name: _____
(Last) (First) (Middle)

Address: _____
(Street #) (City) (Zip)

Birthdate: _____ Birthplace: _____

Student Lives with: () Mother & Father () Mother Only () Mother & Stepfather
() Father only () Father & Stepmother () Foster parents
() Other: _____

Primary Language: _____

Race-Ethnicity: () White () Asian () American Indian-Alaskan Native () Black-African American
() Native Hawaiian-Pacific Islander () Hispanic () Two or More Races

PARENT INFORMATION:

Mother's Name: _____ Home/Cell Phone: _____

Address: _____ Employer: _____

Email Address: _____ Work Phone #: _____

Father's Name: _____ Home/Cell Phone: _____

Address: _____ Employer: _____

Email Address: _____ Work Phone #: _____

Voluntary Information: Is a parent/guardian of the student a member of a branch of the Armed Forces of the United States of America? Yes _____ No _____

Deployed or expect to be deployed? _____

EMERGENCY CONTACTS: (Please list 3 contacts that are not mother/father)

Name	Relationship to Student	Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

