

Last Name: _____ Middle: _____ Grade: _____
 Date of Birth: _____ Gender: _____ Phone: _____ HR: _____
 Address: _____ LASID: _____ Nutrikids: _____
 _____ Bus Route: _____

Contact 1

Corrections

Name:		
Relationship:		
Address:		
City, State ZIP		
Home Phone:		
Work Phone:		
Cell Phone:		
Primary email:		

Contact lives with student Contact may pick up student

Contact 2

Current Information

Corrections

Name:		
Relationship:		
Address:		
City, State ZIP		
Home Phone:		
Work Phone:		
Cell Phone:		
Primary email:		

Contact lives with student Contact may pick up student

In the event the above contacts cannot be reached, please list two additional reliable contacts below

Contact 3

Current Information

Corrections

Name:		
Relationship:		
Home Phone:		
Work Phone:		
Cell Phone:		

Contact 4

Current Information

Corrections

Name:		
Relationship:		
Home Phone:		
Work Phone:		
Cell Phone:		

Who has legal custody of this student? Both Parents Mother Father Guardian Other

Is there any other legal information that the school should be aware of? (Documentation may be required)

Military Family Status

- No, not a member of a military family
- Yes, child of active duty member
- Yes, child of members or veterans who are medically discharged or retired for one year
- Yes, child of member who died on active duty

Parent/Guardian Signature: _____ Date: _____

YEARLY SIGNATURE REQUIRED ABOVE