

## Demonstration Rel Ed

200 Somewhere St.  
Somewhere, NY 99999  
(888) 888-8888

### RE-REGISTRATION FORM 2017 - 2018

FAMILY NAME:	<u>Smith</u>	SALUTATION:	<u>Mr. &amp; Mrs. Robert Smith</u>
FATHER'S NAME:	<u>Robert</u>	MOTHER'S NAME:	<u>Nadia</u>
FATHER'S WORK No.:	<u>(888) 935-4891</u>	MOTHER'S WORK No.:	<u>(887) 836-7363</u>
FATHER'S CELL No.:	<u>(888) 526-8111</u>	MOTHER'S CELL No.:	<u>(888) 872-6989</u>
MAILING ADDRESS:	<u>5 Daffodil Lane</u>	HOME PHONE No.:	<u>(888) 489-5635</u>
	<u>Somewhere, NY 99999</u>	EMAIL:	<u>RSmith@Gmail.com</u>

IN CASE OF EMERGENCY...

CONTACT: Mary Anne Smith (Grandmother) at Home: (888) 555-6467 or Cell: (888) 867-5677

### CHILDREN

1	<u>Karen</u>	WILL RE-REGISTER:	WILL NOT RE-REGISTER:
	SEX: <u>F</u> DATE OF BIRTH: <u>1/ 1/2004</u>		
	CURRENT GRADE: <u>7</u>	<input type="checkbox"/>	<input type="checkbox"/>
	PUBLIC SCHOOL: <u>193</u>		
	PUBLIC SCHOOL GRADE: <u>7</u>		
2	<u>Thomas</u>	WILL RE-REGISTER:	WILL NOT RE-REGISTER:
	SEX: <u>M</u> DATE OF BIRTH: <u>1/ 1/2008</u>		
	CURRENT GRADE: <u>3</u>	<input type="checkbox"/>	<input type="checkbox"/>
	PUBLIC SCHOOL: <u>193</u>		
	PUBLIC SCHOOL GRADE: <u>3</u>		
3	<u>Sally</u>	WILL RE-REGISTER:	WILL NOT RE-REGISTER:
	SEX: <u>F</u> DATE OF BIRTH: <u>1/ 1/2010</u>		
	CURRENT GRADE: <u>1</u>	<input type="checkbox"/>	<input type="checkbox"/>
	PUBLIC SCHOOL: <u>193</u>		
	PUBLIC SCHOOL GRADE: <u>1</u>		

PLEASE CHECK THE INFORMATION ABOVE FOR ACCURACY.

IF ANYTHING IS INCORRECT OR MISSING, KINDLY CORRECT OR ADD THE INFORMATION REQUIRED.

### ADDITIONAL INFORMATION:

Please specify for each child by name; Learning Disabilities, Physical Handicaps, Allergies, family situations ie recent sickness or death, separation or divorce.

This Re-Registration will not be valid unless it is returned with this signed form, plus any appropriate registration fees.

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*Signature of Parent or Guardian*