



ALSEA CHARTER SCHOOL REGISTRATION FORM

Alsea School District 7J
301 South 3rd Street
Alsea, OR 97324
541.487.4305
www.alsea.k12.or.us

Today's Date: _____

STUDENT INFORMATION

Student's LEGAL name [last, first, middle]: _____

Student's preferred name: _____ Current Grade: _____

Birth date: _____ Birth place: _____ Current Age: _____ Gender: Male Female

Street address [street, city, state, zip]: _____

Mailing address [if different]: _____

Last School Attended [name & address]: _____

Does your child have IEP [Individual Education Plan]? Yes No

PARENT/ GUARDIAN

Parent/ Guardian 1: _____ Parent/ Guardian 2: _____

Relationship to student: _____ Relationship to student: _____

Home phone: _____ Home phone: _____

Cell phone: _____ Cell phone: _____

Workplace and phone: _____ Workplace and phone: _____

Email address: _____ Email address: _____

Lives with student: Yes No Lives with student: Yes No

Is this person an emergency contact? Yes No Is this person an emergency contact? Yes No

SECONDARY CONTACT [if people above cannot be reached, whom would you like us to call in case of an emergency or time sensitive issue where your child needs to be picked up such as illness, disciplinary issues or school closures?]

Call first: _____ Call second: _____

Relationship to student: _____ Relationship to student: _____

Home phone: _____ Home phone: _____

Cell phone: _____ Cell phone: _____

OTHER INFORMATION

Other children in the family:

Name: _____ Grade: _____ Name: _____ Grade: _____

Name: _____ Grade: _____ Name: _____ Grade: _____

Name: _____ Grade: _____ Name: _____ Grade: _____

[Please complete the other side]



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Does your child have any health problems or allergies that the school should be aware of?

Would you like to share any other information with the school to help us better serve your student?

Please check and initial by one box below:

Yes	No	Alsea School District has permission to photograph and/ or video my child at school or at school-sponsored events. These photos may be used in the yearbook, on bulletin boards, on the school's website or Facebook page or for school publicity.
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I CERTIFY THAT THE ALL INFORMATION PROVIDED IN THIS DOCCUMENT IS TRUEFUL. I HAVE LEGAL AUTHORITY TO REGISTER THIS STUDENT AT THE ALSEA SCHOOL DISTRICT 7J.

Printed name: _____

Signature: _____

Date: _____