

**PARIS HIGH SCHOOL REGISTRATION FORM**

Today's Date \_\_\_\_\_ Student's Grade \_\_\_\_\_

**STUDENT INFORMATION:**

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Home Phone \_\_\_\_\_ For Statistical Use-Ethnicity \_\_\_\_\_

Date of Birth \_\_\_\_\_

**If this student will be riding a bus please complete information below:**

Pick up address: \_\_\_\_\_ Drop off address: \_\_\_\_\_

**Name and relationship of parent/guardian with whom student lives:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

**PARENT INFORMATION:**

Father's Name \_\_\_\_\_ Address if different \_\_\_\_\_

Home phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address if different \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail Address for Parent \_\_\_\_\_

**ADDITIONAL EMERGENCY CONTACT OTHER THAN ABOVE INFORMATION:**

Name \_\_\_\_\_ Numbers \_\_\_\_\_

**NAMES AND PHONE NUMBERS OF PERSONS PERMITTED TO CHECK YOUR STUDENT OUT OF SCHOOL:**

_____	_____
_____	_____
_____	_____

