

**HONEOYE FALLS-LIMA CENTRAL SCHOOL DISTRICT
PUPIL REGISTRATION FORM**

Date Registered: _____ Date of Entry: _____ Student ID #: _____

Please **PRINT** all information and complete both sides of the form.

*Required Fields

STUDENT INFORMATION			
*Student Last Name:		*Student First Name:	
*Student Middle Initial:			
Age:	*Date of Birth:	*Place of Birth (City, State, Country):	*Current Grade:
If the student is a non-U.S. citizen, what date did he/she enter the U.S.?			*Male _____ *Female _____
*Ethnicity: Circle One:			
American Indian/Alaska Native Asian Black Hispanic Multiracial White			
*PARENT/GUARDIAN INFORMATION		*PARENT/GUARDIAN INFORMATION	
Salutation: Mr. ___ Mrs. ___ Ms. ___ Dr. ___ Other ___		Salutation: Mr. ___ Mrs. ___ Ms. ___ Dr. ___ Other ___	
Name:		Name:	
_____		_____	
Last	First	MI	
Address:		Address:	
_____		_____	
Street		Street	
_____		_____	
City	State	Zip Code	
Mailing Address: (P.O. Box only)		Mailing Address: (P.O. Box only)	
_____		_____	
P.O. Box	City	State	Zip Code
Does student live with you? Yes ___ No ___		Does student live with you? Yes ___ No ___	
Does this contact receive mailings? Yes ___ No ___		Does this contact receive mailings? Yes ___ No ___	
Home Phone:		Home Phone:	
_____		_____	
Cell Phone:		Cell Phone:	
_____		_____	
e-mail Address:		e-mail Address:	
_____		_____	
Employer:		Employer:	
_____		_____	
Work Phone:		Work Phone	
_____		_____	
Pager:		Pager:	
_____		_____	
Marital Status: Circle One:		Marital Status: Circle One:	
Divorced Married Separated Single		Divorced Married Separated Single	
Relationship to Student: Circle One:		Relationship to Student: Circle One:	
Mother Father Legal Guardian		Mother Father Legal Guardian	
Is there a custody order or separation agreement that governs custody of this child? No ___ Yes ___			
If yes, a copy must be provided with this registration form. Please provide information for mailing to joint/non-custodial parent or alternate address if necessary.			

