

Cary Community Consolidated School District 26
2010-2011 REGISTRATION & EMERGENCY INFORMATION

STUDENT INFORMATION

LEGAL First	Middle	LEGAL Last	Gender	Birthdate	Grade	School
Street		City	State	Zip	Subdivision	Phone

Do you have Internet Access that can be used for viewing school/district documents? YES NO

PARENT / GUARDIAN INFORMATION

Father _____ Address _____ City, State, Zip _____ Home Phone _____ Employer _____ Work Phone _____ Cell / Pager _____ Pager _____ Email _____	Step Father _____ Address _____ City, State, Zip _____ Home Phone _____ Employer _____ Work Phone _____ Cell / Pager _____ Pager _____ Email _____
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Mother _____ Address _____ City, State, Zip _____ Home Phone _____ Employer _____ Work Phone _____ Cell / Pager _____ Pager _____ Email _____	Step Mother _____ Address _____ City, State, Zip _____ Home Phone _____ Employer _____ Work Phone _____ Cell / Pager _____ Pager _____ Email _____
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Legal Custody Both Parents Mother Only Father Only Other _____
Children Resides With Both Parents Mother Father Other _____

EMERGENCY INFORMATION

Every attempt will be made to contact the parent or legal guardian in case of an emergency, but if we are unable to reach you, please list alternate contacts below.

Emergency Contact	Relationship to Student	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Physician's Name _____ Phone _____
 Dentist's Name _____ Phone _____
 List any medical problems _____
 Medications _____ Allergies _____
 Special Instructions _____
 Language spoken at home, if other than English _____

List other children in District 26 Schools – include grade and school

Name	Grade	School	Name	Grade	School

If neither parent can be contacted in case of a serious injury or illness, I authorize the school to take such emergency action as may be deemed necessary, including transportation to a hospital or medical center.

Signature of Parent or Guardian _____ **Date** _____