

Cary Community Consolidated School District 26
2009-2010 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	_____	Step Father	_____
Address	_____	Address	_____
City, State, Zip	_____	City, State, Zip	_____
Home Phone	_____	Home Phone	_____
Employer	_____	Employer	_____
Work Phone	_____	Work Phone	_____
Cell / Pager	_____ Pager _____	Cell / Pager	_____ Pager _____
Email	_____	Email	_____
Mother	_____	Step Mother	_____
Address	_____	Address	_____
City, State, Zip	_____	City, State, Zip	_____
Home Phone	_____	Home Phone	_____
Employer	_____	Employer	_____
Work Phone	_____	Work Phone	_____
Cell / Pager	_____ Pager _____	Cell / Pager	_____ Pager _____
Email	_____	Email	_____

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** _____