

Please Print HAS STUDENT EVER BEEN ENROLLED IN GRANITE DISTRICT? YES NO School _____ Year _____

STUDENT'S (LEGAL) LAST NAME FIRST MIDDLE HOME PHONE _____

STUDENT'S ADDRESS APT # CITY ZIP CODE MONTH DAY YEAR

MALE FEMALE DATE OF BIRTH _____

FOR OFFICE USE ONLY

STDNT ID _____

GRADE _____ BUS # _____

FAMILY ID _____
(Elementary Schools Only)

TEACHER _____

OPEN ENROLLMENT PERMIT
 NEW RENEW REVOKE

KINDERGARTEN
 AM PM

IMMUNIZATIONS
 MMR DPT
 2nd MMR POLIO

*****PARENT / GUARDIAN NAME(S) AND ADDITIONAL CONTACTS *****

NAME	RELATION	LIVES WITH	RELEASE YES / NO	HOME PHONE	WORK PHONE	CELL PHONE

*******PERSON TO CALL IN EMERGENCY WHEN PARENT CANNOT BE REACHED*******

NAME OF EMERGENCY CONTACT	HOME PHONE	WORK PHONE	CELL PHONE

GENERAL INFORMATION

DOES THIS STUDENT RESIDE IN A SINGLE PARENT HOME? YES NO

DOES THE STUDENT HAVE HEALTHCARE NEEDS? YES NO

LIST SPECIAL NEEDS: _____

HAS THE STUDENT RECEIVED SPECIAL ED/504 SERVICES? YES NO

WHAT WAS THE FIRST LANGUAGE THE STUDENT LEARNED TO SPEAK? _____

WHAT IS THE LANGUAGE SPOKEN MOST OFTEN BY THE STUDENT? _____

WHAT IS THE LANGUAGE MOST OFTEN SPOKEN IN THE HOME? _____

WHAT LANGUAGE DO YOU PREFER FOR SCHOOL HOME COMMUNICATION? _____

RACE/ETHNICITY

Is this student Hispanic / Latino? YES NO

Native American Tribal Information

Goshute
 Navajo
 Paiute
 Northwest Band Shoshone
 Ute
 Other

Which of the following groups describe the students race?
 ASIAN CAUCASIAN
 BLACK NATIVE AMERICAN
 PACIFIC ISLANDER

PREVIOUS SCHOOL ATTENDED

SCHOOL _____

ADDRESS _____

CITY _____ ST _____ ZIP _____

SIBLINGS IN DISTRICT

SIBLING NAME	BIRTH DATE

 PARENT/GUARDIAN SIGNATURE _____ DATE _____

Granite School District EMAIL _____

REGISTRATION CARD - ROBERT FROST ELEMENTARY - 258 Printed 6/12/2017 10:32:39 AM

Students **First Name**

Last Name

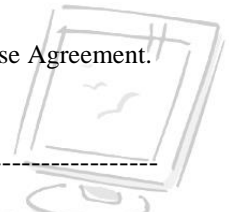
Grade

STUDENT INTERNET USE AGREEMENT – SIGNATURE PAGE

I will use the Granite School District computer equipment following the provisions of the Student Internet Use Agreement.

Student Signature: (student will sign this in class)

Yes, I give: No, I do not give: permission for my child to use the Internet subject to the agreement*.



FIELD TRIP EXPERIENCE PERMISSION SLIP

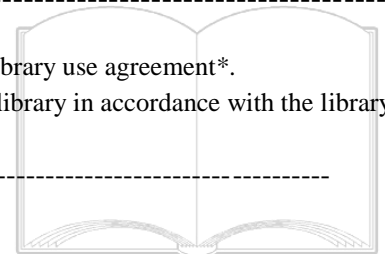
I hereby acknowledge that there may be risks associated with participation in the off-campus activity(ies) listed above, and despite inherent risks, I consent to my student’s attendance and participation. I understand that I may choose to opt my student out of all or some of the off-campus activity(ies), and in the alternative, my student will be expected to attend school and engage in other meaningful educational activities under the supervision of an educator. In addition to granting consent, by signing this document, I hereby release and agree to hold harmless Granite School District and its officers, agents, and employees from all liability or claims stemming from any accident, injury, loss, or other damages that could potentially arise out of my student’s participation in the activity(ies). Finally, I provide consent for my student to receive emergency medical treatment in the event of an accident.

Yes, I give permission for my child. No, I do not give permission for my child.

LIBRARY USE AGREEMENT

I have been notified and agree to the rules and book replacement guidelines outlined in the library use agreement*.

Yes, I give: No, I do not give: permission for my student to checkout from the school library in accordance with the library policy.



MOVIE PERMISSION

For classroom rewards or inside recess due to weather conditions, I give my student permission to watch Disney PG movies.

Yes, I give permission. No, I do not give permission. Permission with prior notification only

PTA CONTACT

I give the PTA permission to use my contact information and contact me regarding PTA school events.

Yes, I give permission. No, I do not give permission.

HEAD INJURY POLICY

By signing, I hereby acknowledge that I have reviewed and understand the information in the Head Injury Policy Guidelines, and that I have been advised, cautioned, and warned by Granite District about the inherent risk of injuries associated with participation in physical activities and sporting events, as that term is defined in Utah law, and which includes but is not limited to physical education class, traditional education class, recess or other activities where injuries are likely to occur. I am fully aware that participation in such physical activities and play exposes students to the risk of injury, ranging from minor to severe, including but not limited to: **sprains, fractures, partial or complete impairment of limbs, brain injury, paralysis, and even death.** I understand that teacher instruction, protective equipment, and medical care provided do not eliminate these risks. I have addressed any questions or concerns with teachers or other school officials. Having been so cautioned and warned, it is still my desire to allow the above named student to participate in physical activities and sporting events, and I do so with full knowledge and understanding of the risks involved.

Yes, I acknowledge

By signing below, you agree to the above checked boxes and the agreements that go along with them.

Parent Signature _____ Date _____

**Full agreements available in the office*