



STUDENT REGISTRATION FORM

20____ - 20____

Grade _____

STUDENT'S INFORMATION

Full Name (First, Middle, Last) _____

Name Called _____

Home Address _____

City, Zip _____

Student Email _____

Home # () _____

City/County of Residence _____ DOB / / _____

Student Cell # () _____

School Prior to TNCS _____

Male Female

PARENT'S INFORMATION

Custody: Both Parents Mother Father Joint Other: _____

Marital Status: Married Divorced Separated Widowed

MOTHER'S INFORMATION

Full Name _____

Name Called _____

Home Address same as student _____ Zip _____

Home # () _____

Email _____

Cell # () _____

Employer _____

Title _____

Work Address _____ Zip _____

Work # () _____

STEP-FATHER INFO

n/a

Full Name _____

Name Called _____

Email _____

Cell # () _____

Employer _____

Title _____

Work Address _____ Zip _____

Work # () _____

FATHER'S INFORMATION

Full Name _____

Name Called _____

Home Address same as student _____ Zip _____

Home # () _____

Email _____

Cell # () _____

Employer _____

Title _____

Work Address _____ Zip _____

Work # () _____

STEP-MOTHER INFO

n/a

Full Name _____

Name Called _____

Email _____

Cell # () _____

Employer _____

Title _____

Work Address _____ Zip _____

Work # () _____

ADDITIONAL CONTACT INFORMATION

List individuals other than parents to call in the event of an emergency

Name	Relationship	Home #	Cell #
1. _____	_____	() _____	() _____
2. _____	_____	() _____	() _____
3. _____	_____	() _____	() _____

GRANDPARENTS' INFORMATION

LIVING PATERNAL GRANDPARENTS	1. Name(s) _____	Home # () _____
	Home Address _____	Zip _____
	Email(s) _____	Cell # () _____
	2. Name(s) _____	Home # () _____
	Home Address _____	Zip _____
	Email(s) _____	Cell # () _____

LIVING MATERNAL GRANDPARENTS	1. Name(s) _____	Home # () _____
	Home Address _____	Zip _____
	Email(s) _____	Cell # () _____
	2. Name(s) _____	Home # () _____
	Home Address _____	Zip _____
	Email(s) _____	Cell # () _____

BILLING & REPORTING INFORMATION

To whom should tuition and other charges be billed?

- Mother Father Other *please provide name & address below*

Name _____

Address _____ Zip _____

SCHOOL MESSENGER: CONTACT INFORMATION

School Messenger allows urgent messages to be quickly sent out to our school community. These messages may include changes in schedule due to weather, school-wide field trip travel updates, and security concerns. Please note how you would like to receive these messages (you may choose multiple options):

EMAIL

- Please add all email addresses listed on Page 1
- Please add **only** the **mother's** email
- Please add **only** the **father's** email

Please add these additional emails to the School Messenger list:

1. _____
2. _____
3. _____
4. _____

VOICE MESSAGE

- Please add all phone numbers listed on Page 1
- Please add **only** the **mother's** phone #
- Please add **only** the **father's** phone #

Please add these additional phone #s to the School Messenger list:

1. () _____
2. () _____
3. () _____
4. () _____

TEXT MESSAGE

- Please add all cell phone numbers listed on Page 1
- Please add **only** the **mother's** cell phone #
- Please add **only** the **father's** cell phone #

Please add these additional cell #s to the School Messenger list:

1. () _____
2. () _____
3. () _____
4. () _____