Lempster Community School

Kindergarten - 8th Grade Registration Checklist

Dear Parents/Guardians,

Please use this checklist to ensure that you have completed and/or included <u>ALL</u> forms. Please bring this checklist with you with your completed packet to the main office to register your child for the school year.

	****Packets with any information missing will not be accepted****	
	Student's Name:	
	Address:	
	Date of Birth: Phone #:	
	Email:	
	(please print clearly)	
*****	**************************	*****
In Packet:	:	
Parent/Gu	uardian Initials	
	_ Student Information Form	
	Records Release Authorization Form	
	Home Language Survey	
	Race/Ethnicity Form	
	Lempster Proof of Residency (notarized statement from town office)	
	_ Emergency/Medical Form	
	_ Student Transportation Form	
Please bri	ring from home:	
	Copy of recent Physical Exam (physicals must be dated within one year of the	first day of
school. If	not available, please provide the most recent physical along with the date of th	e next
physical)		
	_ Copy of current immunizations	
	Copy of Birth certificate	
	Copy of any legal documents	