

# 2017 – 2018 GRANITE BAPTIST SCHOOL REGISTRATION FORM

K3 – K5 APPLICANTS ONLY: CIRCLE MORNING ONLY (AM) OR FULL DAY (FD)

CHECK IF ADDRESS OR PHONE NO. HAS CHANGED

<u>1<sup>ST</sup> STUDENT'S LAST NAME</u>	<u>FIRST</u>	<u>MIDDLE</u>	<u>NICKNAME</u>	<u>SEX</u>	<u>BIRTH DATE</u>	<u>GRADE</u>	<b>AM FD</b>
<u>2<sup>ND</sup> STUDENT'S LAST NAME</u>	<u>FIRST</u>	<u>MIDDLE</u>	<u>NICKNAME</u>	<u>SEX</u>	<u>BIRTH DATE</u>	<u>GRADE</u>	<b>AM FD</b>
<u>3<sup>RD</sup> STUDENT'S LAST NAME</u>	<u>FIRST</u>	<u>MIDDLE</u>	<u>NICKNAME</u>	<u>SEX</u>	<u>BIRTH DATE</u>	<u>GRADE</u>	<b>AM FD</b>
<u>4<sup>TH</sup> STUDENT'S LAST NAME</u>	<u>FIRST</u>	<u>MIDDLE</u>	<u>NICKNAME</u>	<u>SEX</u>	<u>BIRTH DATE</u>	<u>GRADE</u>	<b>AM FD</b>

<u>ADDRESS OF STUDENT(S)</u>	<u>STREET</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP + 4</u>	<u>HOME PHONE #</u>
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<u>FATHER'S FULL NAME</u>	<u>EMAIL ADDRESS</u>	<u>BIRTH DATE</u>	<u>ADDRESS &amp; PHONE # IF DIFFERENT FROM CHILD (REN)</u>
<u>EMPLOYER</u>	<u>OCCUPATION</u>	<u>WORK PHONE #</u>	<u>CELL PHONE # OR PAGER #</u>
			CAN YOU RECEIVE TEXT MSG? yes or no

<u>MOTHER'S FULL NAME</u>	<u>EMAIL ADDRESS</u>	<u>BIRTH DATE</u>	<u>ADDRESS &amp; PHONE # IF DIFFERENT FROM CHILD (REN)</u>
<u>EMPLOYER</u>	<u>OCCUPATION</u>	<u>WORK PHONE #</u>	<u>CELL PHONE # OR PAGER #</u>
			CAN YOU RECEIVE TEXT MSG? yes or no

<u>MAKE AND YEAR OF VEHICLE (S)</u>	<u>TAG NUMBER (S)</u>
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<u>CHURCH NOW ATTENDING</u>	<u>PASTOR'S NAME</u>	<u>PHONE #</u>
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LIST TWO INDIVIDUALS WHOM WE MAY CONTACT IN AN EMERGENCY IF PARENTS CANNOT BE REACHED.

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #</u>	<u>RELATIONSHIP TO CHILD (REN)</u>
<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #</u>	<u>RELATIONSHIP TO CHILD (REN)</u>

<b>(Signature) FATHER OR LEGAL GUARDIAN</b>	<b>(Signature) MOTHER OR LEGAL GUARDIAN</b>	<b>DATE</b>
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For Office Use Only: Reg. Fee Paid: Amount _____	Check # _____	Date Received: _____	Cash: _____	If Not Enrolled: Refunded: Yes No	Amount _____	Cash _____
Book Fee Paid: Amount _____	Check # _____	Date Received: _____	Cash _____		Check # _____	Date _____

