

# 2018/2019 Public Schools of Petoskey Kindergarten Registration

Your child must be 5 on or before September 1, 2018.

## Child's Legal Name:

(As stated on birth certificate)

First

Middle

Last

Male  Female  Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Resident County \_\_\_\_\_

Resident of the Petoskey School District  Yes  No

If "no" what school district? \_\_\_\_\_

List all people living in your child's home \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact #1 \_\_\_\_\_

Contact #2 \_\_\_\_\_

Relationship \_\_\_\_\_

Relationship \_\_\_\_\_

Cell phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_

Work phone \_\_\_\_\_

Landline phone \_\_\_\_\_

Landline phone \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

Contact #3 \_\_\_\_\_

Contact #4 \_\_\_\_\_

Relationship \_\_\_\_\_

Relationship \_\_\_\_\_

Cell phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_

Work phone \_\_\_\_\_

Landline phone \_\_\_\_\_

Landline phone \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

Is your student Hispanic or Latino?  Yes  No

What is your student's race (please check all that apply)?  American Indian/Alaska Native  Asian American  
 Black or African American  Hispanic or Latino  Native Hawaiian or other Pacific Islander  White

Are you experiencing housing challenges that require your child to be living outside of your family's regular residence? (Please choose only one.)  Yes  No

What language(s) are spoken in your child's home? \_\_\_\_\_

What language(s) did your child first learn to speak? \_\_\_\_\_

Does your child speak or understand the English language? \_\_\_\_\_

## Names of brothers and sisters:

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ School \_\_\_\_\_

Does your child have any allergies? \_\_\_\_\_

Does your child have any special needs? \_\_\_\_\_

Comments \_\_\_\_\_

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

Mail to: Spittler Administration Building, 1130 Howard Street, Petoskey MI 49770

Phone: 231-348-2100 Fax: 231-348-2342 email: [morrow.nm.y@petoskeyschools.org](mailto:morrow.nm.y@petoskeyschools.org) website: [www.petoskeyschools.org](http://www.petoskeyschools.org)

Information packets with your assigned date, time and location of round up and required paperwork will be mailed on 3/22/2018.