

LUCK 6-12 SCHOOL ENROLLMENT/EMERGENCY FORM 2019-20

Please fill this form out COMPLETELY.

Student Name _____ **Date of Birth** ____/____/____ **Grade** ____
(Last) (First) (MI)

MALE _____ **FEMALE** _____ **Home/Primary Phone Number** _____

Race: (circle all that apply) Hispanic/Latino Ethnicity Native Hawaiian Black/African American
Hispanic Asian American Indian or Alaskan Native White

1st number to call in case of illness _____

Parent e-mail address(es) _____, _____

Physical Address _____ **City/Zip** _____

Mailing Address _____ **City/Zip** _____
(If different than above)

Usual method of transportation Bus Walks Drives Other _____ **Distance from School** _____ miles

In case of illness/emergency, who should be notified if parent can not be reached? Please list two contact names and phone #s.

1. _____ 2. _____

Does student have any unusual medical conditions/allergies? **YES NO** If yes, explain condition and treatment:

Hospital Preference: _____ **Doctor to be notified** _____
If emergency treatment is required, and the parents cannot be reached immediately, may the school authorities use their own judgment in calling the doctor indicated, or if not available, an alternate doctor? **YES NO**

If no, indicate plan to follow _____

STUDENT HOUSEHOLD DATA

Father _____ **Mother** _____
Stepfather _____ **Stepmother** _____
Male Guardian _____ **Female Guardian** _____
Cell # _____ **Cell#** _____

Employer _____ **Phone #** _____ **Employer** _____ **Phone #** _____

Student lives with: Both Parents Father Mother Guardian Foster Care Other _____

Parent/guardian marital status: Married Single Divorced* Separated* **Is there a court order regarding custody or physical placement? YES/ NO If yes, a copy of the court order must be on file in the school office. Contact the school regarding any restrictions on who may pick up or have contact with your child.*

If custodial parent cannot be reached for any reason can non-custodial be called? **YES NO**
Does non-custodial parent desire copies of report cards? **YES NO** If YES, please provide name/ address on the reverse side
Does non-custodial parent want to be included in our **Skylert Notification System?** Y N If Y, please provide phone # other side

Parent in Military: Please answer the following questions.

1. Is either parent or guardian on active duty in the military? Yes _____ No _____
2. Is either parent or guardian a traditional member of the Guard or Reserve? Yes _____
No _____
3. Is either parent or guardian a member of the Active Guard/Reserve (AGR) under Title 10 or full time National Guard under Title 32? Yes _____ No _____

Parent/Guardian Signature

Date

PLEASE FILL OUT OTHER SIDE 

In the event of an unexpected early dismissal from school you will receive an automated (SKYLERT) message from the school. Please listen to the message. On these days the phone lines get very busy and the staff cannot call individual parents. PLEASE PLAN for this and INFORM the school of any changes to this plan:

In the event of any unexpected early dismissal from school, my child should:

I authorize Luck School District to use/release student photographs/videotapes for our school newspapers, newsletters, school yearbooks, Luck's Facebook page, and/or website, local cable television, and/or local newspapers.

Parent Signature _____ Date _____

*****Questionnaire for Single/Divorced Parents*****

As a school, we can only follow the information that is physically on file at the time, therefore, please make sure to supply us with the appropriate/updated documentation.

In order to deal properly with your child and any issues dealing with who may take him/her from school or visit him/her, we must be properly informed. Be advised that any changes occurring during the course of the school year (following submission of this form) should be brought to the attention of the applicable school office. It is the custodial parent's responsibility to inform the school of any changes in custody and/or visitation rights.

Student's Name _____

Mother's Name _____

Mother's Address _____ Phone Number _____

Father's Name _____

Father's Address _____ Phone Number _____

Is there a court order dealing with custody/visitation? _____

Is there a joint custody order? _____

Which parent has physical placement (custodial parent)? mother father both (shared)

Are there any court orders curtailing or restricting the rights and privileges of your current or former spouse/partner with respect to his/her right to be kept informed of the student's school progress and activities, or participate in those activities?

Does the most recent court order affecting your action expressly permit the student to be released from school to the non-custodial parent? _____ If no, please explain. _____

PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE APPLICABLE PORTION OF ANY SUCH COURT ORDER PERTAINING TO THE TWO PREVIOUS QUESTIONS. UNLESS WE HAVE ON FILE A COPY OF A COURT ORDER PROHIBITING CONTACT WITH NON-CUSTODIAL PARENT, WE CANNOT PREVENT HIM/HER FROM SEEING THE STUDENT OR TAKING THE STUDENT FROM SCHOOL PROPERTY. The school can only rely on documentation that is physically on file.

Signature of Custodial Parent

Date