

Pendleton School District 16R Registration Form

Legal Last Name	First Name	Middle Name
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Student Information:

Grade ____ Gender (circle) M F Birth Date: _____ Social Security # _____

Birth Place _____ / _____ / _____ Primary Language _____
(City) (State) (Country)

Mother's Maiden Name _____ Migrant # _____

Last School Attended:	
Address:	
City & State:	Phone:
	Fax:

It is the responsibility of the parent/guardian to provide the school with any legal documentation or court orders that apply to the student and are relevant to the child's educational experience.

The Federal Family Education Rights and Privacy Act of 1974 permits the school district to release certain information, known as "directory information," to certain people or institutions, unless you request **IN WRITING**, that such information not be released. In many cases, requests for this type of information come from the news media, students, or staff creating web pages or the armed forces for recruiting purposes. "Directory information" may include:

- ✓ Student's name, address and telephone number
- ✓ Date and place of birth
- ✓ Participation in officially recognized activities and sports
- ✓ Weight and height if athletic team member
- ✓ Dates of attendance
- ✓ The most recent educational agency or institution attended by the student
- ✓ Photographs of other similar information
- ✓ In the case of student information in web pages, the following will be excluded: last names, telephone numbers, and addresses.

Pictures may occasionally be taken of students and/or student work for use in web pages, news media or school district publications, as well. We will not release any "directory information" for commercial or other purposes not related to school business.

Special Consent: I authorize my child to be photographed, video taped, or audio taped in connection with the educational program and activities of the Pendleton School District. I understand that my child will not be paid for the photographic image. I also consent to public display of such photograph, video tape, or audio tape image in connection with the Pendleton School District programs and activities.

_____/_____/_____
 Signature Relationship Date

If you do not wish us to release "directory information" and/or have your child appear in a photograph, videotape, film or slide, please let your school know **IN WRITING** within two weeks of receiving this notice. Otherwise, it is not necessary to take any action.

If you have questions on this notification, please call the Pendleton School District at (541)276-6711

Physical Address _____ City _____ Zip _____

Mailing Address

Street / PO

Box _____ City _____ Zip _____

Home Phone _____

Other Children Living in Household

Childs Legal Name (last, first, middle)	Gender	Birthdate	School	Grade
1.				
2.				
3.				
4.				
5.				
6.				

Please attach a separate piece of paper to list additional children.

Parent/Guardian Information and Emergency Contact Information (list by priority)

	Name	Relationship	Lives with	Phone	Cell Phone	Employer
1				Home		
	Email			Work		
2				Home		
	Email			Work		

Emergency Contacts - allowed to pick up student from school
Relationship

3			Home		Cell	
			Work			
4			Home		Cell	
			Work			
5			Home		Cell	
			Work			
6			Home		Cell	
			Work			

OFFICIAL USE ONLY:

Enrollment code		Enrollment date		Grade		Teacher	
Records requested		Records received		Immunization status			