

Work Phone: ____-____-____

Email: _____@_____

Best method of contact: Home ____ Cell ____ Work ____ Email ____

Father's Name: _____

Occupation: _____

Religion of father: _____

Mother's First & Maiden Name: _____

Occupation: _____

Religion of mother: _____

Pupil lives with: Both Parents ____ Father ____ Mother ____
Guardian ____

Parents are: Married ____ Separated ____ Divorced ____
Deceased ____ Remarried ____

Area you currently live in:

Bedford Borough ____ Bedford Township ____
Snake Spring Township ____ Hyndman ____
Chestnut Ridge Area ____ Colerain Township ____
Everett Area ____ Cumberland Valley Township ____
Harrison-Manns Choice ____ Other ____

Information needed upon registration

- Immunization Records
- State Birth Certificate
- Social Security Card
- \$25.00 Nonrefundable registration fee

****Kindergarten students must have a physical exam and a dental exam before the start of school...the paper work must be on file BEFORE the first day of school.****

Thank you for completing the registration form completely. Please note that it is against PA State Law to permit a child to attend school without all of the above information requested.