Bow School District
55 Falcon Way, Bow, NH 03304
Phone: 603-224-4728 Fax: 603-224-4111

School Registration Form

STUDENT INFORMATION

Legal Name: _____ Grade Entering: ____ Enrollment Date: _____
Last First Middle

Home Address: _____
Street Number Street Address City, State Zip

Home Phone#: _____-_____-_____ Student Cell Phone#: _____-_____-_____ Student E-mail: _____

Gender: _____ Birthdate (MM/DD/YYYY): ____/____/_____ Birth Place: _____
M or F City State Country

Previous School Attended: _____
Name Street Address City State Zip

Date of Entry in United States (if appropriate): _____IEP_____ 504_____ Student ID #: _____
Yes or No Yes or No For Office Use Only

Ethnicity (Please Select One)

_____Not, Hispanic or Latino

_____Yes, Hispanic or Latino

Race (Please Select One or More):

_____ American Indian/Alaska Native _____ Native Hawaiian/Pacific Islands
_____ Asian _____ White _____ Black/African American

Student's First Language: _____

As part of the school district's effort to provide your child with an appropriate educational program, we need to know what language you and your child speak at home. Thank you for your cooperation.

Is your child an immigrant? _____
Please list all languages spoken in your home. _____
Which language did your child first hear or speak? _____
If English is the only language listed, please stop here. If another language is listed, please answer the rest of the questions.
Which language do you speak most often speak to your child? _____
Which language does your child most often speak at home with adults? _____
Which language does your child most often speak at home with other children? _____
Which language does your child read? _____
Which language does your child write? _____
Has your child ever studied the English Language in school? _____ Which Grades? _____

Student lives with:

Both Parents____ Father Only____ Mother Only____ Grandparents____ Father/Stepmother____ Mother/Stepfather____ Guardian____

Other _____ Sibling(s) in Bow School District (include name and grade)_____

_____

Is there a joint custody or parenting plan in effect? ____Yes ____ No **(If yes, plan must be on file with the school for enforcement**)
Is there a restraining order in effect? ____Yes ____ No **(If yes, legal papers must be on file with the school for enforcement)**
Restraining order is against: _____ Effective Dates: _____
Is there a second household that needs to receive mailings? ____Yes ____ No **(If yes, please include name and address below)**

_____
Name Street Address City State Zip

PARENT SIGNATURE (Your signature indicates the information given on both sides of this form is true and accurate)

_____ Date: _____

HOUSEHOLD INFORMATION
Contact #1:

_____
Legal Last Name First Name

_____
Street Number Street Address City, State Zip

PO Box #: _____ Contact 1 Gender: _____
City, State, Zip M or F

Email Address: _____

Place of Employment: _____

Relationship to Student: _____

Home Phone: _____-_____-_____

Work Phone: _____-_____-_____

Cell Phone: _____-_____-_____

HOUSEHOLD INFORMATION
Contact #2:

_____
Legal Last Name First Name

_____
Street Number Street Address City, State Zip

PO Box #: _____ Contact 2 Gender: _____
City, State, Zip M or F

Email Address: _____

Place of Employment: _____

Relationship to Student: _____

Home Phone: _____-_____-_____

Work Phone: _____-_____-_____

Cell Phone: _____-_____-_____

Contact #3:

_____
Legal Last Name First Name

_____
Street Number Street Address City, State Zip

PO Box #: _____ Contact 3 Gender: _____
City, State, Zip M or F

Email Address: _____

Place of Employment: _____

Relationship to Student: _____

Home Phone: _____-_____-_____

Work Phone: _____-_____-_____

Cell Phone: _____-_____-_____

Contact #4:

_____
Legal Last Name First Name

_____
Street Number Street Address City, State Zip

PO Box #: _____ Contact 4 Gender: _____
City, State, Zip M or F

Email Address: _____

Place of Employment: _____

Relationship to Student: _____

Home Phone: _____-_____-_____

Work Phone: _____-_____-_____

Cell Phone: _____-_____-_____

BEFORE AND AFTERSCHOOL PLANS
- This is the schedule your child will follow **everyday** unless we receive notification otherwise. Please indicate students intended destination afterschool. If your child is riding a bus, please list the bus number.

Monday	Tuesday	Wednesday	Thursday	Friday
AM-	AM-	AM-	AM-	AM-
PM-	PM-	PM-	PM-	PM-

IMPORTANT: If you make a change in your child's schedule, please notify the school AND the childcare facility, if appropriate.

STUDENT DRIVER INFORMATION
- Bow High School students may park on school grounds with a Bow High School parking permit only.

Make: _____ Model: _____ Color: _____

Plate Number: _____ Permit #: _____ Permit Fee Paid: _____
Office Use Only Check # or Cash

PHOTO RELEASE
Photos of Bow School District students are, on occasion, featured in the school newsletter, local newspaper and on the BSD website. Please complete the following:

_____ _____ _____
Student's Name has permission to be photographed. Parent/Guardian Signature Date

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School Registration Form Checklist

Student Name: _____ Grade: _____ Today's Date: _____

Parent/Legal guardian must accompany student at registration.

- Completed and signed **registration form**
- Copy of IEP or 504 Plan (if applicable)
- Completed and signed Bow School District **residency declaration form**
- Two forms of current **proof of residency** (within the last 60 days; make copy of each)
- Completed and signed **student record release form** (BHS)
- Unofficial copy of **student's transcript** showing all credits received or final report card if you are entering gr. 9
- Copy of **birth certificate**
- Legal guardians must provide **court documents** stating such
- Copies of all **Legal Document/Court Orders** (parenting plan and custody guidelines, guardianship, restraining orders, orders with regard to educational records)
- Record of **immunizations and physical**
- Completed **transfer student health history form**
- Completed **emergency information form**
- Completed **developmental history** form (BES)
- Completed the **Acceptable Use Agreement** form
- Completed the **Bow School District Food Service prepayment** form
- Completed the **Early Release/Late Arrival/Senior Open Campus** form (BHS)