

Helena Flats School District #15  
New Student Enrollment Form

Student's Legal Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Last) (First) (Middle)

Sex: M F Date of Birth: \_\_\_/\_\_\_/\_\_\_ Place of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Hispanic/Latino: Y N Race: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Guardian Full Name: \_\_\_\_\_ Lives with: Y N Receives mail: Y N

Address (if different from child) \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employed at: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship: Mom Stepmom Dad Stepdad Other \_\_\_\_\_

Guardian Full Name: \_\_\_\_\_ Lives with: Y N Receives mail: Y N

Address (different from child) \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employed at: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship: Mom Stepmom Dad Stepdad Other \_\_\_\_\_

If this child is living with a person who is not a legal guardian, please complete the following:

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Relationship to the child: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Where Employed: \_\_\_\_\_ Occupation: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Phone: \_\_\_\_\_

IEP: Y N 504 Plan: Y N Speech: Y N Other Services: \_\_\_\_\_

**List all children 18 years or under living in household:**

Name	Birth Date	Relationship	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Emergency Contact (Other than parent/guardian)**

Emergency Contact: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**Emergency Medical Informaion**

Does your child take any medication on a daily basis? \_\_\_\_Yes \_\_\_\_No

If yes, what medication? \_\_\_\_\_

Will this medication be given at school? \_\_\_\_Yes \_\_\_\_No

List any other medical information that you think the school may need:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any other information that you think the school may need:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_