



**Kinnikinnick CCSD #131  
Registration Form  
2016-2017**

**Parent 1**

Name: \_\_\_\_\_ Relation \_\_\_\_\_

last/first

Day Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Will be used by Power Announcement. Extensions are not recognized.

Employer: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Stepparent if applicable Name: . phone \_\_\_\_\_

**Parent 2**

Name: \_\_\_\_\_ Relation \_\_\_\_\_

last/first

Day Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Will be used by Power Announcement. Extensions are not recognized.

Employer: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Stepparent if applicable Name: . phone \_\_\_\_\_

**Emergency Contact Information other than parent**

Contact #1 \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone type (home, cell, work)

Contact #2 \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone type (home, cell, work)

Contact #3 \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone type (home, cell, work)

**Please fill out both sides of this form**