

Grade _____

TONICA GRADE SCHOOL REGISTRATION FORM 2024-2025

Student _____ Nickname _____

Date of Birth _____ Last Middle First Gender: _____ Social Security Number _____

Birthplace _____ Existing IEP? _____
(City) (State)

Student Address _____ City _____ Zip _____

Student lives with: Both Parents Mother Father Other _____

Ethnic Background: American Indian _____ Asian / Pacific Islander _____ Black/African American _____
Hispanic _____ Multiracial _____ White / Caucasian _____ Other _____

Is a language other than English spoken at home? Yes/No If yes, which one(s)

Is the student's parent or legal guardian an active military member? Yes/No

F
A
M
I
L
Y

Father's Name: _____ Mother's Name: _____ (_____)
Maiden

Father's Address: _____ Mother's Address: _____

Father's Phone: _____ Mother's Phone: _____

Father's Cell Phone: _____ Mother's Cell Phone: _____

Father's E-Mail Address: _____ Mother's E-Mail Address: _____

Father's Employment: _____ Mother's Employment: _____

Father's Work Phone: _____ Mother's Work Phone: _____

Names and ages of other children living in family:

M
E
D
I
C
A
L

Name of responsible adult who will assume responsibility for the child if the parent cannot be reached:

1. _____ Relationship _____

Primary Phone # _____ Secondary Phone # _____

2. _____ Relationship _____

Primary Phone # _____ Secondary Phone # _____

Family Physician _____ Phone # _____

Medications _____

Any other known health problems/allergies that the school should be made aware of:

STUDENT REQUEST FOR TEXTBOOK LOAN

I hereby request the loan of secular textbooks in accordance with Public Act 79-961 of 1975. Tonica Community Consolidated Grade School #79 in Tonica, Illinois, LaSalle County. Student is responsible for damage and/or lost books.

Initials

STUDENT DISCIPLINE CODE/ HANDBOOK RECEIPT

I have received a copy of the Tonica School District #79 discipline code/ Handbook. I further acknowledge that, upon written or oral request, the administration will make itself available to clarify or otherwise discuss the discipline code.

Initials

FIELD TRIP RELEASE

My son/daughter has my permission to attend all Tonica Grade School sponsored field trips for the school year. I am responsible for calling and notifying the school if I choose for my child **NOT** to attend a particular trip.

Initials

PERMISSION TO PHOTOGRAPH OR VIDEOTAPE STUDENT

I grant consent to Tonica Grade School District #79 to identify a picture of my child or ward, by full name, in any school sponsored material, publication, videotape, or website. This consent is valid for the entire time my child or ward is enrolled in Tonica Grade School. I may revoke this consent at any time by notifying the Superintendent.

Initials

TRANSPORTATION – AFTER A BUS ACCIDENT

In the event of a school bus accident, the Emergency Medical Services (EMS) personnel will determine by the seriousness of the accident and injury if a person should be transported to an appropriate hospital. The School District shall abide by the judgment of the appropriate EMS personnel. In the event (EMS) personnel determine that at least one passenger has a significant injury and must be transferred to an appropriate hospital, I want my child also transported to the hospital as stated on reverse page.

This decision is made even though the EMS personnel determined that my child was not injured and was not to be sent to the hospital. I further agree that my request to send my child will be at my expense and not at the expense of the School District.

(initials) _____ Yes, as a precaution, transport my student in all situations
(initials) _____ No, only if deemed injured by EMS

MEDICAL RELEASE

I hereby give my consent for the above student to receive any treatment deemed necessary at _____ Emergency Room staff for any illness or injury. Every effort will be made to contact parents or guardians to explain the nature of the problem prior to any involved treatment. After emergency treatment, transfer will be responsibility of parent/guardian.

PARENT/GUARDIAN SIGNATURE

I have read and understand all of the preceding permission statements.

(Parent or guardian signature)

(Date)