

Environmental & Adventure School

REGISTRATION – Form B

Student & Family Information

PLEASE PRINT CLEARLY AND USE BLUE OR BLACK PEN

Student's Name _____ Birth Date ____/____/____
(Last) (First) (Middle)

Gender: _____ Gender Identity: _____

Current School _____ Teacher Name _____ Grade _____

LWSD Neighborhood Middle School _____

Did your student apply to other Choice Schools? **Yes** **No**

If yes, which one(s)? _____

1st Household

Female Parent/Guardian Name _____
(Last) (First) Preferred Email address _____

Preferred Phone (____) _____ cell work home (please circle)

Employer _____ Work Phone (____) _____

Male Parent/Guardian Name _____
(Last) (First) Preferred Email address _____

Preferred Phone (____) _____ cell work home (please circle)

Employer _____ Work Phone (____) _____

Mailing Address _____
Street City Zip

Home Phone: (____) _____ Listed _____ Unlisted

Name of Parent(s) / Guardian(s) with whom student lives: _____

2nd Household (if applicable)

Female Parent/Guardian Name _____
(Last) (First) Preferred Email address _____

Preferred Phone (____) _____ cell work home (please circle)

Employer _____ Work Phone (____) _____

Male Parent/Guardian Name _____
(Last) (First) Preferred Email address _____

Preferred Phone (____) _____ cell work home (please circle)

Employer _____ Work Phone (____) _____

Mailing Address _____
Street City Zip

Home Phone: (____) _____ Listed _____ Unlisted

Legal Parent/Guardian Signature _____ **Date** _____