

## RE-REGISTRATION FORM

Mother's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: \_\_\_\_\_ em@il: \_\_\_\_\_

### STUDENTS INFORMATION

1) Full Name \_\_\_\_\_

REL.ED.GRADE  
2017-2018



**Please check the school that your child currently attends:**

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Susan E. Wiley          | <input type="checkbox"/> Deauville Garden East    | <input type="checkbox"/> Deauville Garden West  | <input type="checkbox"/> Great Neck Road           |
| <input type="checkbox"/> Albany Avenue           | <input type="checkbox"/> Alleghany Avenue         | <input type="checkbox"/> Daniel Street          | <input type="checkbox"/> Harding Avenue            |
| <input type="checkbox"/> West Gates              | <input type="checkbox"/> William Rall             | <input type="checkbox"/> Park Avenue            | <input type="checkbox"/> Northwest                 |
| <input type="checkbox"/> Northeast               | <input type="checkbox"/> Copiague Middle School   | <input type="checkbox"/> Copiague High School   | <input type="checkbox"/> Lindenhurst Middle School |
| <input type="checkbox"/> Lindenhurst High School | <input type="checkbox"/> Amityville Middle School | <input type="checkbox"/> Amityville High School |  |

Other School (please write the name): \_\_\_\_\_

**Child's Public School Grade** (School Year 2017-2018):    **1**   **2**   **3**   **4**   **5**   **6**   **7**   **8**   **9**   **10**   **11**   **12**

**Special Needs:** Learning Disabilities, Physical Handicaps, Allergies, Emotional Problems, Family Situations (as separation, divorce, death)

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2) Full Name \_\_\_\_\_

REL.ED.GRADE  
2017-2018



**Please check the school that your child currently attends:**

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Susan E. Wiley          | <input type="checkbox"/> Deauville Garden East    | <input type="checkbox"/> Deauville Garden West  | <input type="checkbox"/> Great Neck Road           |
| <input type="checkbox"/> Albany Avenue           | <input type="checkbox"/> Alleghany Avenue         | <input type="checkbox"/> Daniel Street          | <input type="checkbox"/> Harding Avenue            |
| <input type="checkbox"/> West Gates              | <input type="checkbox"/> William Rall             | <input type="checkbox"/> Park Avenue            | <input type="checkbox"/> Northwest                 |
| <input type="checkbox"/> Northeast               | <input type="checkbox"/> Copiague Middle School   | <input type="checkbox"/> Copiague High School   | <input type="checkbox"/> Lindenhurst Middle School |
| <input type="checkbox"/> Lindenhurst High School | <input type="checkbox"/> Amityville Middle School | <input type="checkbox"/> Amityville High School |  |

Other School (please write the name): \_\_\_\_\_

**Child's Public School Grade** (School Year 2017-2018):    **1**   **2**   **3**   **4**   **5**   **6**   **7**   **8**   **9**   **10**   **11**   **12**

**Special Needs:** Learning Disabilities, Physical Handicaps, Allergies, Emotional Problems, Family Situations (as separation, divorce, death)

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3) Full Name \_\_\_\_\_

REL.ED.GRADE  
2017-2018



Please check the school that your child currently attends:

- Susan E. Wiley       Deauville Garden East       Deauville Garden West       Great Neck Road
- Albany Avenue       Alleghany Avenue       Daniel Street       Harding Avenue
- West Gates       William Rall       Park Avenue       Northwest
- Northeast       Copiague Middle School       Copiague High School       Lindenhurst Middle School
- Lindenhurst High School       Amityville Middle School       Amityville High School

Other School (please write the name): \_\_\_\_\_

Child's Public School Grade (School Year 2017-2018): 1 2 3 4 5 6 7 8 9 10 11 12

Special Needs: Learning Disabilities, Physical Handicaps, Allergies, Emotional Problems, Family Situations (as separation, divorce, death)

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

4) Full Name \_\_\_\_\_

REL.ED.GRADE  
2017-2018



Please check the school that your child currently attends:

- Susan E. Wiley       Deauville Garden East       Deauville Garden West       Great Neck Road
- Albany Avenue       Alleghany Avenue       Daniel Street       Harding Avenue
- West Gates       William Rall       Park Avenue       Northwest
- Northeast       Copiague Middle School       Copiague High School       Lindenhurst Middle School
- Lindenhurst High School       Amityville Middle School       Amityville High School

Other School (please write the name): \_\_\_\_\_

Child's Public School Grade (School Year 2017-2018): 1 2 3 4 5 6 7 8 9 10 11 12

Special Needs: Learning Disabilities, Physical Handicaps, Allergies, Emotional Problems, Family Situations (as separation, divorce, death)

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

OFFICE USE ONLY

Env. #: \_\_\_\_\_

Registration Fee: \$ \_\_\_\_\_ Cash: \$ \_\_\_\_\_ Check: \$ \_\_\_\_\_ # \_\_\_\_\_ Receipt #: \_\_\_\_\_

Approved for F.A. 2 3 4 5 6 \$ \_\_\_\_\_ B \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

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