Registration Form-Abbreviated Copy

718 Arbor Court
South Haven, MI

*An *'Application for Enrollment'* must be on file for each SPLS K-8 student and needs to be submitted before submitting this 'Abbreviated Registration Form'.*

***Please fill out the following form for your child (ren).*

STUDENT #1 NAME _____ **Birth Date:** _____
Last **First** **Middle I.**
GRADE REGISTERING FOR: _____

STUDENT #2 NAME _____ **Birth Date:** _____
Last **First** **Middle I.**
GRADE REGISTERING FOR: _____

STUDENT #3 NAME _____ **Birth Date:** _____
Last **First** **Middle I.**
GRADE REGISTERING FOR: _____

PRIMARY ADDRESS: _____
Street City State Zip

PRIMARY CONTACT NUMBER: _____ SECONDARY: _____

PRIMARY (PARENT) EMAIL ADDRESS _____@_____

SECONDARY EMAIL ADDRESS (OPTIONAL) _____@_____

***By signing below I am stating that the information listed above is complete and accurate to the best of my knowledge.**
***Furthermore, I understand that by registering my child (ren) that I am required by school board policy (see 'Student Handbook') to pay the first month's tuition, even if I decide to disenroll my child before the school year officially begins.**

Signature: _____ **Date:** _____