



**Emergency Contacts-In the event the parent or guardian can not be reached** Names and addresses and phone numbers of two people with whom you have made arrangements to take responsibility for your child in the event you cannot be reached. Please indicate if the phone number is a cell phone

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_ Cell ? Y N

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_ Cell ? Y N

**Legal Information (If Applicable)**

If parents are divorced or separated, is there a court approved custody document?  Yes  No

Who retains legal custody? \_\_\_\_\_ Relationship to child? \_\_\_\_\_

If joint, who has residential (physical) custody? \_\_\_\_\_

Legal guardianship document provided

Is the student in the care of a guardian(s) other than his/her Parent?  Yes  No

If yes, name of legal guardian(s) \_\_\_\_\_

Relationship to child \_\_\_\_\_

Is the student in foster care?  Yes  No If yes, provide copy of placement order (DSS-2999)

**Additional Mailing**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Relationship Last Name First Name

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

**Previous School Information**

Has the student attended Brunswick (Brittonkill) Central School previously?  Yes  No If yes, when? \_\_\_\_\_

School District last attended \_\_\_\_\_ School Name \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip code

Phone number \_\_\_\_\_

Preschool attended (if registering for Pre Kindergarten or Kindergarten) \_\_\_\_\_

**Additional Services (If Applicable)**

**Special Education Services**

Does the student currently have an IEP (Individualized Education Plan):  Yes  No

If yes, please indicate the type of services

Consultant teacher  Self-Contained Classes  Out of District Class (BOCES or QUESTAR)  Resource Room

Other, please describe \_\_\_\_\_

**Related Services**

Speech and Language Therapy  Occupational Therapy  Physical Therapy

Counseling  Other, please describe \_\_\_\_\_

**Academic Intervention Services (AIS/Remedial)**

Math  English Language Arts  Science  Social Studies

**Other Services** \_\_\_\_\_

504 Plan  English as a Second Language (ESL)  Gifted and Talented  Other \_\_\_\_\_

**As specified by New York State Education Law and the Commissioner's Regulations, a continuum of program alternatives is available to meet the varied needs of students with disabilities who reside in New York. For more information regarding the referral and evaluation of students suspected of having a disability, please refer to New York State's [A Parent's Guide to Special Education](#) or contact Myles Goss, Director of Special Education, at 279-4600 x 2702 with questions or to request a copy.**

## Photograph Permission

From time to time, your child may be photographed during the school year during a classroom project, assembly or field trip or may be videotaped as part of a concert or other special event. These photographs may be used on the school district's website, in school publications or released to the media to recognize student achievement or depict activities of the school.

- I DO give my permission for my child to be photographed or videotaped
- I DO NOT give my permission for my child to be photographed or videotaped

## Residency

Examples of acceptable proof of residency documents (Two required)

- Current Lease/Rental Agreement
- Current Mortgage
- Current Utility Bill (electric, gas, fuel, cable, insurance)
- Current pay stub showing address

Brittonkill eNews is a new e-mail notification system that allows parents or community members to sign up to receive periodic e-mails with news and announcements about Tamarac schools.

- Yes If yes, what email address would you like to use? \_\_\_\_\_
- No

I affirm that the above information is true and correct. I understand that this registration form is an official record and that the provision of false information may be unlawful.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*All documents are to be returned to:  
Registrar's Office  
Brunswick (Brittonkill) Central School  
3992 NY 2  
Troy, NY 12180  
Phone: 518-279-4600 Ext. 2006  
Fax: 518-279-4889*

### *Office Use Only*

Documents provided to the district

- Driver's License
- Lease/Rental Agreement
- Mortgage
- Utility Bill
  - Electric
  - Gas
  - Fuel
  - Cable
- Birth Certificate
- Court Papers describe \_\_\_\_\_
- Immunization
- Physical Exam

Cohort: Date entered 9<sup>th</sup> grade \_\_\_\_\_

Anticipated Start Date \_\_\_\_\_

Homeroom \_\_\_\_\_

Counselor \_\_\_\_\_