

COE-BROWN NORTHWOOD ACADEMY  
NORTHWOOD NH 03261  
2011-12  
REGISTRATION FORM

PLANNED YEAR OF GRADUATION 2014

\_\_\_\_\_  
(M/F)

STUDENT'S FULL LEGAL NAME: PLEASE PRINT

\_\_\_\_\_  
(LAST) (LEGAL FIRST) (FULL MIDDLE)

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
YEAR MONTH DAY CITY STATE

CHECK ONE-  /WHITE  /BLACK  /ASIAN  /HISPANIC  /AMERICAN INDIAN/ALASKAN NATIVE

TELEPHONE# \_\_\_\_\_ PREVIOUS SCHOOL \_\_\_\_\_

PARENT EMAIL ADDRESS (FOR CORRESPONDENCE PURPOSES) \_\_\_\_\_

NAME OF PARENT/GUARDIAN/PERSON/S YOU LIVE WITH: PLEASE CIRCLE

MOTHER \_\_\_\_\_ STEPMOTHER \_\_\_\_\_ GUARDIAN \_\_\_\_\_

FATHER \_\_\_\_\_ STEPFATHER \_\_\_\_\_ GUARDIAN \_\_\_\_\_

NAME(S) TO WHICH MAIL SHOULD BE ADDRESSED \_\_\_\_\_  
NAME/S

MAILING ADDRESS \_\_\_\_\_  
STREET  
TOWN STATE ZIP

STREET ADDRESS \_\_\_\_\_  
STREET  
TOWN OF RESIDENCE STATE ZIP

DO YOU CURRENTLY RECEIVE SPECIAL EDUCATION SERVICES?  YES  NO  
DO YOU CURRENTLY HAVE A 504 PLAN?  YES  NO

OPTIONAL NON-CUSTODIAL PARENT WHO SHOULD RECEIVE HOME-SCHOOL COMMUNICATIONS:

\_\_\_\_\_  
NAME EMAIL ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
TOWN STATE ZIP

OPTIONAL 1. WHAT LANGUAGE DID YOU LEARN TO SPEAK FIRST? \_\_\_\_\_

2. IS ENGLISH THE PRIMARY LANGUAGE SPOKEN IN YOUR HOME?  
(INFORMATION USED TO LOCATE STUDENTS WHO MAY NEED SPECIAL LANGUAGE INSTRUCTION)

IF THE STUDENT IS INTERESTED IN A FALL SPORT, PLEASE GIVE INFORMATION ON WHERE TO CONTACT  
IN AUGUST: YES  NO  SPORT \_\_\_\_\_

SUMMER ADDRESS \_\_\_\_\_ SUMMER TELEPHONE# \_\_\_\_\_

SPORTS AVAILABLE TO GIRLS: SOCCER, VOLLEYBALL, CROSS-COUNTRY AND GOLF

SPORTS AVAILABLE TO BOYS : SOCCER, CROSS-COUNTRY AND GOLF