

For Office use only		Date Received:	
Date of Birth Certificate Verification:		Open Enrolled?	
Name on Birth Certificate:		Birth Certificate:	
State:	DOB:	Proof of Address:	
School Official's initials of who verified:		Immunization Records:	
		Skyward Enrollment:	1 2 3
<input type="checkbox"/>	Entered onto SS	Classroom Assignment:	



Fall Creek Elementary

4K

Fall Creek 4K Registration Parent Form

Child's Name: _____

Class Preference:

_____ Either one will work for our family

_____ AM Class 7:55 - 11:05

_____ PM Class 12:00-3:10

Transportation:

_____ We are interested in bussing

_____ We will be transporting daily

PLEASE BRING TO OPEN HOUSE!!

Forms needed:

Birth Certificate

Proof of Address

Immunization Records

After Online registration is complete, Birth Certificate & Proof of Address has been verified, requests will be made on a first come first serve basis.

Birth Certificates must be verified in person before class preference will be considered.

We WILL NOT be accepting specific teacher requests.