



If duplicate Information/Correspondence is requested, please provide the following information:

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

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

Does your child have a current Individual Education Program (IEP) for Special Education? Yes <input type="checkbox"/> No <input type="checkbox"/> Has your child ever had an Individual Education Program (IEP) for special education consideration? Yes <input type="checkbox"/> No <input type="checkbox"/>
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**Emergency/Medical Information:** In case of illness or emergency, please list in order who you want notified (please include the name and number of someone **other than a parent** who can give permission for your student to leave school if a parent cannot be reached).

1. Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_ Preferred Hospital \_\_\_\_\_

Known Allergies/Medical Conditions \_\_\_\_\_  
\_\_\_\_\_

- The school may apply first aid treatment until the family can be contacted: Yes  No
- We give our consent for the school to use its own judgment in securing medical aid and ambulance service in case the parents cannot be reached: Yes  No

**Grandparent Information**

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**READ CAREFULLY AND SIGN AS INDICATED:** We understand that St. Teresa reserves the right to cancel the registration of any student at any time whatsoever for reason of deficiency in scholarship, unsatisfactory conduct, or for any other just cause.

<p><b><i>The student agrees to comply with the regulations and requirements of St. Teresa High School and to cooperate with the administration officers, faculty and students in maintaining high standards of conduct and scholarship and in promoting the general welfare of St. Teresa High School. It is understood that the applicant accepts registration as a student at St. Teresa subject to the above provisions.</i></b></p>
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\_\_\_\_\_  
Signature of Father/Guardian

\_\_\_\_\_  
Signature of Mother/Guardian

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

**Nondiscriminatory Policy** St. Teresa High School admits students of any race, color, sex or national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, sex, or national and ethnic origin in the administration of its educational policies, admissions policies, scholarships and loan programs, and athletic and school administered programs.