

# Kindergarten Round-Up Registration Form

If your child will be 5 by September 15, 2011, please return this completed form to your school office;  
Thomas Jefferson school office at: 792-2498, or email: [carterj@newton.k12.ia.us](mailto:carterj@newton.k12.ia.us)  
112 Thomas Jefferson,  
Newton, IA 50208

or

Berg Elementary school office at: 792-7442 or email: [blatchfordl@newton.k12.ia.us](mailto:blatchfordl@newton.k12.ia.us)  
1900 N 5<sup>th</sup> Ave E  
Newton, IA 50208

All students need to register in their home attendance area. The electronic form will be on our school homepage.  
If you know of any neighbors or friends who have children that should register for kindergarten round-up, please have them contact the school in their area.

Student's Legal Name \_\_\_\_\_  
First Middle Last

Child's Nickname \_\_\_\_\_ Preschool \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
Month Day Year

Is the student in Foster Care (Circle One): Yes No

**Race/Ethnicity: 2 part Question:**

**Is the individual Hispanic/Latino? (Circle One)** Yes No

**Is the individual from 1 or more of these races (Circle all that apply):**

American or Asian Indian Asian Black or African American Native Hawaiian or Pacific Islander White

Parent/Guardian \_\_\_\_\_  
(Lives with)

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Other Numbers \_\_\_\_\_ cell work other

Other Numbers \_\_\_\_\_ cell work other E-mail Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Phone Number \_\_\_\_\_ Relationship \_\_\_\_\_

Medical Concerns \_\_\_\_\_

I currently have \_\_\_\_\_ child (ren) attending \_\_\_\_\_ School

Names/Grades \_\_\_\_\_

**Parent Night is March 31st, 2011 at 6:00 p.m. in the gym.**

**Mid March information will be sent to you in the mail to fill out and return to this meeting.**

Please bring a copy of your **child's birth certificate** along with the forms you are sent to the parent meeting.

**Thomas Jefferson Round-Up Dates-April 11 & 12. Berg Elementary Round up Dates-April 13 & 14.** Students will come for a 2 hour session BOTH days. **Information regarding which 2 hour session your child is to attend will be given to you at Parent Night. Please check which round up time you prefer and we will try our best to accommodate you.**

(A.M.)  (Mid morning)  (P.M.)

\*\*\*\*\* Office Use \*\*\*\*\*

Today's Date \_\_\_\_\_ Number \_\_\_\_\_ ID Number \_\_\_\_\_

The Newton Community School District does not discriminate on the basis of sex, race, national origin or disability in educational programs and activities. Inquiries and grievances may be directed to the Administration Office, 807 S 6<sup>th</sup> Ave W, Newton, IA 50208