

# HOUSEHOLD REGISTRATION FORM

## MADISON PUBLIC SCHOOLS - MADISON, NEBRASKA

### Household Information:

Physical address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Previous address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Head(s) of Household #1 \_\_\_\_\_ #2 \_\_\_\_\_  
 (This may be parents, guardians, grandparents, etc. Please list both if parents)

Married                       Single                       Separated                       Divorced

Household phone (      ) \_\_\_\_\_ (if cell phone - who does it belong to \_\_\_\_\_)

#1 \_\_\_\_\_ Work phone (      ) \_\_\_\_\_ Cell phone (      ) \_\_\_\_\_

#2 \_\_\_\_\_ Work phone (      ) \_\_\_\_\_ Cell phone (      ) \_\_\_\_\_

E-mail address \_\_\_\_\_ (please write legibly - address is case sensitive!)

**Please list all others living in the home (adults & children) and  
their relationship to the head(s) of household.**

**Examples -**

→ Son/daughter      → Grandchild      → Nephew/niece      → Foster child      → Specify Other (friend, fiancée, etc.)

NAME: Last	First	M.I.	Relation to head(s) of household
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NAME: Last	First	M.I.	Relation to head(s) of household

### Emergency contacts numbers different from those listed above:

NAME	Phone Number	Type (work, cell, other)	Relation to student(s)
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NAME	Phone Number	Type (work, cell, other)	Relation to student(s)