

# Student Registration Form for School

## Student Information

- **Student Name:** [First Name, Middle Name, Last Name]
- **Date of Birth:** [MM/DD/YYYY]
- **Gender:** [ ] Male [ ] Female [ ] Prefer not to say
- **Address:** [Street Address, City, State, Zip Code]
- **Previous School (if applicable):** [School Name]

## Parent/Guardian Information (Table Format with 8 Rows)

Relationship to Student	Name	Contact Number	Email Address	Occupation	Address (if different from student)
(Note: Continue the table for additional guardians as necessary.)					

## Educational Information

- **Grade Applying For:** [Fillable Field]
- **Special Educational Needs (if any):** [Fillable Field]

## Emergency Contact Information

- **Name:** [Fillable Field]
- **Relationship to Student:** [Fillable Field]

- **Contact Number:** [Fillable Field]

### **Health Information**

- **Allergies (if any):** [Fillable Field]
- **Medical Conditions (if any):** [Fillable Field]

### **Consent and Acknowledgment**

- **Parent/Guardian Signature:** \_\_\_\_\_
- **Date:** [MM/DD/YYYY]