

HOMEWOOD SD 153 2015-2016 REGISTRATION FORM

Parent/ Guardian: Last Name, First Name (Please Print) Address: _____

FEES: Please use the following table to figure fees for the school year. Please note that fees are **PER STUDENT**. The amount includes assignment notebook, technology lab, art, music, physical education, and activity fees.

GRADE LEVEL	MANDATORY BOOKS AND MATERIALS FEE	OPTIONAL SNACK DRINK (K- 2)
Pre-K	No Fee	N/A
EC	No Fee	N/A
K - 2	\$195	\$40 Milk or Juice
3 - 4	\$205	N/A
5 - 6	\$220	N/A
7 - 8	\$240	N/A

Please **print** the student's name as it appears on the legal birth certificate when completing the following section.

Last name	First name	Middle name	Gender	Birth Date	Grade Level	Ethnicity (A-G below)	Fees
			M/F				\$
			M/F				\$
			M/F				\$
			M/F				\$
			M/F				\$
K-2 Only Milk (optional)							\$
K-2 Only Juice (optional)							\$
Total Amount Due							\$

Ethnicity: The following information is required by the Illinois State Board of Education. Please select the letter(s) that best describe(s) the ethnicity of your child(ren). **Please list letter(s) only.**

- A. **Hispanic or Latino** (a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race)
- B. **American Indian or Alaska Native**
- C. **Asian** (a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam)
- D. **African American/Black**
- E. **Native Hawaiian or other Pacific Islander** (a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)
- F. **White**
- G. **Multi-Racial** (*Please include all of the letters that are relevant in the ethnicity column above*)

Please make checks payable to: Homewood School District #153.

Enclosed is my check or money order: # _____ Dated: _____

My canceled check is my receipt. A \$25 charge will be added to all returned checks. If paying in cash or by VISA, Discover or MasterCard, you must pay in person at the Administrative Office.

FOR OFFICE USE ONLY						
Paid	Fee waiver Applied	Will return Waiver by _____ Parent/Guardian Initials	New	MV	Lease	Processed