



Registration Form

Student/Family Name: _____

**Attending the 9/14
Grandparents Day Event?**
(Circle one)

Maternal Grandmother's Name: _____

YES NO

Address: _____

Preferred Email: _____

Maternal Grandfather's Name: _____

YES NO

Address (if different from above): _____

Preferred Email: _____

Paternal Grandmother's Name: _____

YES NO

Address: _____

Preferred Email: _____

Paternal Grandfather's Name: _____

YES NO

Address (if different from above): _____

Preferred Email: _____

Additional/Honorary Grandparent Name: _____

YES NO

Address: _____

Preferred Email: _____

Please provide the total number (grandparents/guests and students) who plan to participate in the Grandparent luncheon _____

Do any of those attending have special accessibility/mobility or dietary needs?

Please return this form at Registration (one form per family, please)

August 2nd for 10th, 11th, and 12th Grade Families

August 9th for Incoming 9th Grade Families