HANOVER AREA SCHOOL DISTRICT HOUSEHOLD CONTACT INFORMATION

Surname(s):(Child(ren)'s Last Name					-				
Primary Address:# Street		Apt #	F	C	ity		State	Zip Code	
Primary Phone Number:			Primary Email:						
	11								
Is there a Custody Agreemen	t? YES	NO (plea	ase supply a copy)	Child live	s with: BOT	н Пмо	ther Fathe	r Guardian	
Parent/Guardian Contact Inf	formation								
Mother/Guardian lives at th	is Address?	YES	□NO		Change the Foll	owing Info	ormation		
Mother/Legal Guardian NAM	IE:				Relati	onship to	child(ren):_		
Address:Phone #:Phone #:									
	# STREET CITY nail:			STATE ZIP CODE			Have Pickup Rights:		
Employer:			Phone #:			Email:			
Step Parent Name:			Phone #:			Have Pickup Rights: YES NO			
Father/Guardian lives at thi	s Address?	☐ YES	□NO		Change the Fol	lowing In	formation		
Father/Legal Guardian NAM	E:				Relati	onship to	child(ren): _		
Address:						#:			
# STREET Email:	CITY			STATE Z		Have l	Pickup Rights:	□ YES □NO	
Employer:									
Step Parent Name:			Phone #:			Have Pickup Rights: YES NO			
Please list <u>All Students</u> living	at the Prim	ary Addre	ss:						
Child's Name		Child's Grade	School Attending		Relationship to Primary Parent/Guardian		Have a Custody Agreement/PFA/ Foster Letter (Supply a Copy)		
1.									
2.									
3.									
4.									
5.									
EMERGENCY CONTACT INFO INCASE WE ARE UNABLE TO REACH		PLEASE LIST	AT LEAST (3) OT	HER CONTAC	T (NOT THE PA	ARENTS/I	LEGAL GUARI	DIAN) TO CONTACT	
CONTACT NAME	ONTACT NAME PHONE NUMI		PHONE HAVE PI PIORITY (EX. 1,2,3)		CKUP RIGHTS RELATI		DNSHIP TO LIVES AT THE PRIMARY ADDRESS		
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		1 1							