

**Arthur Day Middle School**  
**Grade 8 Registration Form for Returning Students**  
**2020-2021**

Student Last Name: \_\_\_\_\_

Student First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Legal Name of Parent/Guardian: \_\_\_\_\_

**CUSTODY**

Are there any legal restrictions to this child?  NO  YES

**HEALTH CARE INFORMATION**

Have there been any changes in the health status of your child?  NO  YES

If YES, please explain: \_\_\_\_\_

**REQUIRED COURSES:**

English Language Arts	Social Studies	Applied Arts
Mathematics	Physical Education	Health
Science	French	

**OPTION COURSES:** *(all students must select one Option course)*

Select 1<sup>st</sup> & 2<sup>nd</sup> choices: \_\_\_ **Art** \_\_\_ **Band \*\*** \_\_\_ **Guitar** \_\_\_ **Drama**

Note: Band may only be selected if taken last year  
or special arrangements have been made with the Band teacher.

**NOTE:** If any of the above information changes during the year,  
please send a note or telephone the school.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

Please return to your child's homeroom teacher by  
**Monday, March 2, 2020**