



South Summit Middle School
Registration /Bus Transportation form

Student Name: _____ Birthdate: _____

Grade: _____ Gender: _____ Ethnicity: Hispanic ____ Yes ____ No Home Language: _____

Please circle one:

Race: (W) White (B) Black or African American (A) Asian (P) Native Hawaiian/Pacific Islander (I) American Indian/Alaska Native

(T) Tribal Affiliation (TP) Paiute (TO) Other (TU) Ute (TS) Shoshone NWB (TG) Goshute (TN) Navajo

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

Permanent Address Information

Physical Address: _____ City: _____ Zip: _____

Mailing Address: _____ City: _____ Zip: _____

Mother's email: _____

Father's email: _____

Previous School: _____

(Name, Address, Phone, Fax)

_____ No Bus Service Needed (If marked, no further information is needed)

_____ No AM Bus service needed

_____ No PM Bus service needed

Bus Pick up/Drop off information

_____ AM Pick up Contact and address same as listed above (if not please complete the information below)

AM Pick UP Contact Person: _____ Phone: _____

Street Address: _____ City: _____

_____ PM Drop off Contact Person: _____ Phone: _____

Street Address: _____ City: _____

School Fees can be paid online at MySchoolFees.com. School lunch is \$2.25 per day and can be paid at www.k12paymentcenter.com.