

SCHOOL CENSUS INFORMATION
School District of Edgar

Dear Resident,

Please complete and return this form to the Edgar School District Office, 112 N. 2nd Ave., PO BOX 198, Edgar, WI 54426. In order to reach all new families in our area, as well as all newborn babies, we are asking that this form be completed by anyone who **has moved into the Edgar School District** or **has a new addition to their family**.

Parent's Name (Last, First & Spouse's): _____

Address _____

Telephone _____ Township or Municipality _____

PLEASE LIST ALL CHILDREN **NEW TO THE DISTRICT** (LESS THAN 21 YEARS OLD).

	NAME	AGE	DATE OF BIRTH	SEX	SCHOOL ATTENDING:
1					
2					
3					
4					
5					

If you have any questions, please call 352-2727 and ask for Lisa Nowak.

Thank you.

Wisconsin Statute 118.13 No person may be denied admission to any public school or be denied participation in, be denied the benefits of or be discriminated against in any curricular, extracurricular, pupil service, recreational or other program or activity because of the person's sex, race, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation or physical, mental, emotional or learning disability.