## Millcreek Township School District

**Household Form** (MUST be completed by a parent or legal guardian)

## **PRIMARY HOUSEHOLD**

I/We understand that all the information provided here is correct and current and that if residency should change for any reason, it is the responsibility of the resident to notify MTSD and amend your address and household information. Any false information provided can be punishable by law and MTSD may hold all parties responsible for a non-resident fee.

Street Address:		Apt/Lot #:
City/State/Zip:		Household Phone:
	Rents/Leases: h whom the student resid	*Lives with a Millcreek Resident: *Complete Residency Affidavit (blue form) es:
Parent/Legal Guardian: L	ast name:	First name:
Relationship to Student: _	Email	Address:
Cell: T	ext Messaging:YN	Receive District Notifications:YN
Work Phone Number:		
Second adult resident v	with whom the student re	sides:
Parent/Legal Guardian: L	ast name:	First name:
Relationship to Student: _	Email	Address:
Cell: T	ext Messaging:YN	Receive District Notifications:YN
Work Phone Number:		

## PERSONS LIVING IN THIS HOUSEHOLD

Name Last, First	M/F	Relationship to Student	School/Grade	Phone #

## **EMERGENCY CONTACTS (do NOT include persons already listed in households)**

Name Last, First	M/F	Relationship to Student	Cell #	Other Phone #	
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SECONDARY HOUSEHOLD				•	
		First name:			
Street Address:			Apt/Lot #:		
City/State/Zip:			Household Pho	one:	
Relationship to Student:	ent: Email Address:				
Cell: Text	Messaging: _	YN R	eceive District Notifi	cations:YN	
Is this parent to receive mailing	s? Y	N • Is this p	arent to receive portal	access?Y	
PERSONS LIVING IN THIS  Name Last, First	M/F	<u>_</u>	School/Grade	Phone #	
			l		
MILITARY CONNECTIONS	(Indicate CL	JRRENT active	e duty member of th	e Armed Forces)	
Parent/Guardian Name:					
Status-Please check one:	Active Duty D	eployed	Active Duty No	ot Deployed	
Start Date Active Duty:		End Date Acti	ive Duty:		
Site/Location:		Branch:			
Name of Parent, Guardian or Ass	signed Represe	ntative	Dat	 e	
Name of Parent, Guardian or Ass	signed Represe	ntative	Dat	e	