

This is for school use, only. It is the responsibility of each school coordinator to secure the information below AND enter it online at the Back to School Clothing Drive event registration web page. No hard copies will be accepted by Back to School Clothing Drive.



2020 Student Registration / Student Information

PLEASE PRINT:

School Name _____ District _____

First Name _____ Last Name _____

Student Age _____ Gender _____

Grade at time of registration _____

Race (Required) _____ (White, Black/African American, Hispanic/Latino, American Indian or and Alaska Native, Asian or Pacific Islander, Other)

Student has met federal income guidelines and/or is categorically eligible for free and reduced lunch program
____yes

Parent/Guardian Information

Parent / Guardian First Name _____ Last Name _____

Parent/ Guardian Phone _____
(###-###-####)

This child has permission to participate in a free dental screening during the event. _____No

***Please note the Dental Consent form is for opt out only. Parent will need to sign form if they do not want student to participate in the dental clinic.**

Sizes are no longer required for 2020 distribution event. Size chart is only for your reference.