Lake Washington School District





Student Residence Information: To be completed by parent or guardian Student Name _____ Grade _____ Parent/Guardian Name _____ City, ZIP _____ Please bring original document to register student Document verifying address: _____ (Example: Purchase and Sale Agreement, Rental Agreement, Utility Bill) I certify the above statement is correct. I understand that falsification of the above residence information will result in my child being transferred to his/her attendance school. Parent/Guardian Signature Relationship to student Date

Date

Registrar's signature