

**2009 Project Fresh Start Registration Information Date: \_\_\_\_\_**

**August 27<sup>nd</sup> at  
Almond Bancroft!**

Please complete the information for each child **grades K-12**.  
*Photocopy as necessary.*

**Parent/Guardian Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Language:** \_\_\_\_\_

- **This registration form is specific to Project Fresh Start-Almond Bancroft satellite site on August 27<sup>th</sup>.**
- Almond-Bancroft students do not need to pre register.
- If you have more than five children who qualify to register, please photocopy this form or download additional forms at [www.unitedwaypoco.org](http://www.unitedwaypoco.org).
- Only list children grades K-12. (Not 4-K)
- For additional information regarding registration please refer to the parent/guardian letter.
- If you have further questions please call the United Way Volunteer Center at 715-341-6740 or dial 2-1-1.

Child's First and Last Name	Gender	Age	Grade	School
1.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
2.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
3.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
4.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
5.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				

**In order to demonstrate the need for services, please circle the appropriate boxes according to your Household Size and Household Income (< = Less than or equal to):**

<b>Household Size (circle one)</b>	1	2	3	4	5	6	7	8
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<b>Household Yearly Income (circle one)</b>	< \$20,035	< 26,954	<\$33,873	< \$40,972	< \$47,711	< \$54,630	< \$61,549	< \$68,468
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*\*If Household Yearly Income is unknown please circle Household Monthly Income.*

<b>Household Monthly Income (circle one)</b>	< \$1,669	< \$2,246	< \$2,822	< \$3,399	< \$3,975	< \$4,552	< \$5,129	< \$5,705
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Please return this form to: **United Way Volunteer Center, 1100 Centerpoint Dr., Stevens Point, WI 54481**

**Office Use Only** Entered By \_\_\_\_\_ Date Entered \_\_\_\_\_ Status: Approved  
Pending  
Follow Up

**PLEASE USE THIS SHEET ONLY IF YOU FILL THE COVER SHEET**

Parent/Guardian Name: \_\_\_\_\_

\*If used, this page must be accompanied by cover sheet or registration may be voided.

Child's First and Last Name	Gender	Age	Grade	School
6.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
7.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
8.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
9.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
10.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				
11.				
<b>Ethnicity (circle one):</b> White Af. Am. Hispanic/Latino Native Am. Asian Pac. Islander Unknown				