

# Family Access Registration Form

August 30, 2007

Thank you for requesting access to your child's educational record in Skyward Family Access. We welcome you and hope you will find this an important communication tool in our quest to provide the best education for your child.

To activate your Family Access Account, please provide the following information:

**Your Name:** \_\_\_\_\_  
(Please Print Your Name Clearly)

**Student(s) Names** *Please list all children who live with you (or have lived with you), and have or are attending any schools in the Olympia School District. Please describe the relationship of the child to you.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Your e-mail Address:** \_\_\_\_\_  
(Please Print Clearly)

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Return this form to the school office. You should receive an e-mail advising you of your new user name and password within 3-5 business days.

If you have any questions, please contact the Student Information Systems Office or Michelle Anderson, CHS Assistant Principal. We look forward to working with you!

Capital High School  
360 596-8012

Student Information Systems  
360 596-6150

**DISCLAIMER:**

Please note: the Olympia School District does not support off-site technology. For equipment, system, or browser support, please consult your computer dealer or software vendor.