

**Cheltenham Township and Cheltenham Township School District
Earned Income Tax Registration Form**

No. & Street: _____ Date: _____

Post Office: _____ Phone: _____

LIST ANY ADULTS 18 YEARS OF AGE AND OVER

Last Name	First	Middle	Soc. Sec. No.	Employer	Employer's Address

LIST ANY CHILDREN UNDER 18 YEARS OF AGE

Last Name	First	Middle	Soc. Sec. No.	Employer	Employer's Address

Date you moved to above address: _____

Did you move here from another Pennsylvania location? Yes _____ No _____

If yes, please list previous address and resident school district:

Your Employer: _____ Spouse's Employer: _____

Working Jurisdiction (Twp/Boro/City) _____ Working Jurisdiction (Twp/Boro/City) _____

Is the Earned Income Tax withheld from your pay? _____ From Spouse's pay? _____

Are you self-employed? _____ Spouse? _____

If you have no earned income, please record the reason why: retired/homemaker/temporarily unemployed/disabled/
student/minor (please state age)/other (please specify)

You _____ Spouse _____

Your Signature _____ Date _____