

Primary Contact Information

Please check one of the following that applies to you: Legal Parent Guardian

Last Name

First Name

Middle Name

Relationship to student

Mailing Address

City

State

Zip Code

Main Telephone

Cell Phone

Other Phone (if available)

Employer

Work Telephone

Ext.

Would this person like to receive information by email instead of sending items home with your student?

Yes No

Email address

Does the student reside with this individual? Yes No

Secondary Contact Information

Please check one of the following that applies to you: Legal Parent Guardian

Last Name

First Name

Middle Name

Relationship to student

Mailing Address

City

State

Zip Code

Main Telephone

Cell Phone

Other Phone (if available)

Employer

Work Telephone

Ext.

Would this person like to receive information by email instead of sending items home with your student?

Yes No

Email address

Does the student reside with this individual? Yes No

Does this individual require a separate mailing of school related information? Yes No

Are there any legal restrictions on who may pick up your child? Yes No

If yes, please explain (**LEGAL DOCUMENTS REQUIRED FOR COURT-ORDERED RESTRICTIONS**)

Please list the name and age of anyone living at the address listed above who is eighteen years old or younger.

Name

Age

_____	_____
_____	_____
_____	_____

EMERGENCY CONTACT INFORMATION

Student's Name

Legal Last Name

Legal First Name

Legal Middle Name

Please list the individuals that should be contacted in case of an emergency at school and parents/guardians **cannot** be reached. **Do not include parents/guardians here.**

Emergency Contact 1

Emergency Contact Name
(Other than parents/guardians)

Telephone

Relationship to student

Telephone

Emergency Contact 2

Emergency Contact Name
(Other than parents/guardians)

Telephone

Relationship to student

Telephone

Emergency Contact 3

Emergency Contact Name
(Other than parents/guardians)

Telephone

Relationship to student

Telephone

Emergency Contact 4

Emergency Contact Name
(Other than parents/guardians)

Telephone

Relationship to student

Telephone