

# STUDENT INFORMATION CARD

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother: \_\_\_\_\_ Cell#: \_\_\_\_\_

Father: \_\_\_\_\_ Cell#: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Name & #: \_\_\_\_\_

Medical Concerns: \_\_\_\_\_

Afternoon Transportation \_\_\_\_\_

Siblings/Teacher's Names \_\_\_\_\_

Other useful information: \_\_\_\_\_