

PARENT / GUARDIAN INFORMATION (Will be contacted first by the following order)

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|---|------------------------------|------------|------------|-------------|-------------------------|--|
| 1. | Title | First Name | Last Name | Middle Name | Relationship to Student | Does the student live with this person? (please select one) <input type="radio"/> Yes <input type="radio"/> No |
| | Address (Street & House No.) | | Apt. No. | City | State | |
| | Home Phone | Cell Phone | Work Phone | Employer | Email Address | |
| 2. | Title | First Name | Last Name | Middle Name | Relationship to Student | Does the student live with this person? (please select one) <input type="radio"/> Yes <input type="radio"/> No |
| | Address (Street & House No.) | | Apt. No. | City | State | |
| | Home Phone | Cell Phone | Work Phone | Employer | Email Address | |
| Who has legal custody of child? Parent/Guardian <input type="checkbox"/> #1 <input type="checkbox"/> #2 listed above | | | | | | |
| Is there a joint custody or parenting plan in effect? <input type="radio"/> Yes <input type="radio"/> No (If yes, plan must be on file with the school) | | | | | | |
| Is there a restraining order in effect? <input type="radio"/> Yes <input type="radio"/> No Against: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other (If yes, legal papers must be on file with the school) | | | | | | |

EMERGENCY / OTHER CONTACTS (The person to whom the child may be released in the absence of the parents / guardian)

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|----|------------------------------|------------|------------|------|-------------------------|----------|
| 1. | Title | First Name | Last Name | | Relationship to Student | |
| | Address (Street & House No.) | | Apt. No. | City | State | Zip Code |
| | Home Phone | Cell Phone | Work Phone | | | |
| 2. | Title | First Name | Last Name | | Relationship to Student | |
| | Address (Street & House No.) | | Apt. No. | City | State | Zip Code |
| | Home Phone | Cell Phone | Work Phone | | | |
| 3. | Title | First Name | Last Name | | Relationship to Student | |
| | Address (Street & House No.) | | Apt. No. | City | State | Zip Code |
| | Home Phone | Cell Phone | Work Phone | | | |