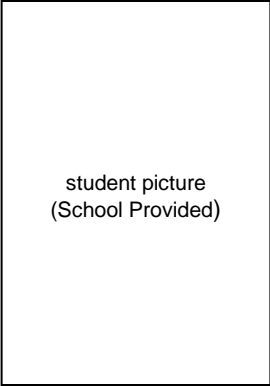


2022-2023 STUDENT INFORMATION CARD

_____	_____	_____
Last Name	First Name & Middle Initial	Birthday
_____	_____	_____
Street Address	City/ZIP	Preferred Phone

preferred email for contact		



Student resides with:
 Mother&Father Mother Only Father Only Mother&Stepfather
 Father&Stepmother Legal guardian Grandparent(s) Other: _____

Resident Parent/Guardian Information:

_____	_____	_____	_____
Mr./Mrs./Ms.first & last name	Employer	Work Phone	Cell Phone
_____	_____	_____	_____
Mr./Mrs./Ms.first & last name	Employer	Work Phone	Cell Phone

MEDICAL / HEALTH Check if any of the following apply to this student.

Allergies (including food): _____
 Dietary Restrictions: _____
 Asthma * Bee/Bug severe reaction
 Diabetes Heart Problem Reduced Hearing Vision Problem

Please explain in detail any of the above and any necessary treatment: _____

*Does your child use an inhaler? yes _____ no _____
Doctor & Clinic: _____ Address: _____ Telephone: _____

Complete this portion ONLY if you have a legal document which legally restricts another person from contact with this student. A copy of the legal document would be appreciated for our records.

Name	Relationship to student	Description
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EMERGENCY INFORMATION

In the event the student is ill or injured at school and the parent/guardian cannot be reached at the indicated numbers on the other side, who would you like the school to contact? (Local persons only please, such as a relative, neighbor or friend who lives close by) **DOES THE SCHOOL HAVE YOUR AUTHORIZATION TO RELEASE THE CHILD TO THIS PERSON(S)** YES NO

_____	_____	_____
1. Name & relationship	Address	Telephone
_____	_____	_____
2. Name & relationship	Address	Telephone
_____	_____	_____
3. Name & relationship	Address	Telephone

Daycare Information, if this applies to your child, please give name, address and telephone number:

_____	_____	_____
Name	Address	Telephone

Should the occasion arise, I give my permission for my child's picture to be included in preschool publications, preschool news releases, video presentations or preschool facebook page. YES NO

_____	_____
Parent/Guardian Signature	Date