



Parent/Guardian Information Form

Child's Name: _____

Birthday: _____ Child lives with: _____

Parent/Guardian 1: Name: _____

Address: _____

Home Phone Number: _____

Work Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Place of employment _____

Work address _____

Work hours _____

Parent/Guardian 2: Name: _____

Address: _____

Home Phone Number: _____

Work Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Place of employment _____

Work address _____

Work hours _____

Additional Contacts *In case of emergency- other than parents*

1. Name: _____ phone #: _____

Address _____

Relationship to child: _____

2. Name: _____ phone #: _____

Address _____

Relationship to child: _____