



Tuesday School @ HCC

2026-2027

STUDENT NAME: _____ (Last) _____ (First)

_____ (Nickname)

AGE: _____ BIRTHDATE: _____ BOY or GIRL

ADDRESS: _____ (Street)

_____ (City) _____ (State) _____ (Zip)

BEST FAMILY EMAIL:

PARENTS: _____ Cell _____ Home _____

_____ Cell _____ Home _____

SIBLINGS: _____

MEDICAL CONDITIONS or ALLERGIES:

EMERGENCY CONTACT (someone other than parent) Name _____

Relationship _____ Cell _____ Home _____