

Child's Name: \_\_\_\_\_

Child's Cell # (if applicable): \_\_\_\_\_

**SCHOOL RECORDS**

So that we can keep our records up to date, will you please fill out and return this page to us? It is most important that we have business addresses and telephone numbers.

Parents/Guardian: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

(If parents are separated, list both addresses and telephone)

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

*Do you have a computer \_\_\_\_\_ if yes, do you have access to a printer \_\_\_\_\_*

*\*We are developing an email listing that will be used to keep parents/guardians informed about upcoming events and activities (i.e., future newsletters, dinner dance, topics of interest, etc.). Email address will only be used by Clear View/AMIC and will not be shared with any external sources.*

Mother's Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Father's Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Doctor's name and address to be called in the event of emergency:

\_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Name, address, phone of person to be called in event of emergency and parents cannot be reached.

Name: \_\_\_\_\_

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

Phone numbers: \_\_\_\_\_

Relationship to child: (Grandmother, Neighbor, etc.): \_\_\_\_\_