



Student Information Sheet

Name of student: _____

Grade: _____ Homeroom teacher: _____

Home address: _____

City: _____ Zip code: _____ Home phone: _____

Mother's Name: _____

Father's Name: _____

Mother's work number: _____

Father's work number: _____

Mother's cell number: _____

Father's cell number: _____

Additional number: _____

Additional number: _____

Mother's e-mail address: _____

Father's e-mail address: _____

Allergies/Conditions/Medical conditions:

Please list names of all persons authorized to pick up the student:

Please list names of all persons not authorized to pick up the student:

FOR OFFICE USE ONLY:

Date paid: _____

Selected program: COMPUTERS or MATH, SCIENCE

Check number or cash amount: _____

Signed: _____