

FAMILY INFORMATION

PARENT 1

Name

Email

Relationship to Child

Cell Phone

PARENT 2

Name

Email

Relationship to Child

Cell Phone

ADDRESS

Address below belongs to:

Parents 1 & 2 Parent 1 only Parent 2 only Other _____

Street

Apt #

City

State

Zip

CHILD 1

Child's Name

Birthdate

Age

Grade

Male Female

Care Info (i.e. food allergies, medical conditions)

CHILD 2

Child's Name

Birthdate

Age

Grade

Male Female

Care Info (i.e. food allergies, medical conditions)

CHILD 3

Child's Name

Birthdate

Age

Grade

Male Female

Care Info (i.e. food allergies, medical conditions)

FAMILY INFORMATION

CHILD 4

Child's Name

Birthdate

Age

Grade

Male Female

Care Info (i.e. food allergies, medical conditions)

Rev 09-18-2018

**Family Welcome
Team Member**

**ADHERE A SET OF CHILD
LABEL(S) HERE**

CHILD 1

CHILD 2

CHILD 3

CHILD 4