



Student Info

Student's Name \_\_\_\_\_  
 Birthday \_\_\_\_\_  
 Home address \_\_\_\_\_  
 Home # \_\_\_\_\_  
 Religion \_\_\_\_\_  
 Parish/church \_\_\_\_\_

Mom		DAD	
Cell		Cell	
Email		Email	
Work		Work	

\*If we are unable to reach either parent, please contact.....

Name \_\_\_\_\_ phone \_\_\_\_\_

Relationship to child \_\_\_\_\_

Name \_\_\_\_\_ phone \_\_\_\_\_

Relationship to child \_\_\_\_\_

Blessed Sacrament School, in the event of a medical emergency has permission to treat my child \_\_\_\_\_, \_\_\_\_\_

parent signature

My child's interests are: \_\_\_\_\_

My child approaches learning with....

\_\_excitement \_\_curiosity \_\_anxiety \_\_confidence \_\_reluctance

\*Please check below if there is any area in which you can help in the classroom-

\_\_\_can make Xerox copies    \_\_\_help set up student AR accounts (note days & times available)

\_\_\_\_\_

\_\_\_can help with chair bags (requires sewing but EASY directions are available)

-----other \_\_\_\_\_