

# 2021- 2022 MIDWEEK SCHOOL STUDENT INFORMATION

Student's Name \_\_\_\_\_

Parents \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Parent Cell # \_\_\_\_\_ Youth Cell # \_\_\_\_\_

Parent e-mail \_\_\_\_\_ Youth e-mail \_\_\_\_\_

School you attend \_\_\_\_\_

Current Grade \_\_\_\_\_ Birthday \_\_\_\_\_

Any known allergies (food, etc.) or medical conditions:

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This child enjoys: \_\_\_\_\_

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This child does not enjoy: \_\_\_\_\_

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## Emergency Contact Information

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

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