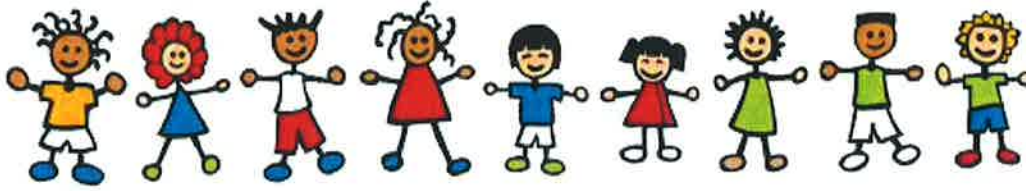


School _____ Grade _____



Student Information Sheet

Student's Name _____

Address _____

City and zip code _____

Mother's Name _____

Mother's Phone Number: _____ Work Number _____

Father's Name _____

Father's Phone Number _____ Work Number _____

Email address _____

Preferred method of communication: Call Text Email

Emergency Contact's Name: (other than parent) _____

Relationship to student: _____

Phone Numbers for Emergency Contact: _____

Approved to check student out at GT Center with picture I.D.

1. _____

2. _____

3. _____

