PUPIL INFORMATION

Last Name	First Name	Middle Name

Pupil's Household Street Address	City, ST, Zip Code

Pupil's Household Phone	Date of Birth

Pupil's Religion	Parish to which family belongs

Ethnic Background	Medical Conditions	Allergies

	Emergency Contact #1 Primary Phone	Emergency Contact #1 Secondary Phone
Emergency Contact #1 (other than parent)		
	Emergency Contact #2 Primary Phone	Emergency Contact #2 Secondary Phone
Emergency Contact #2 (other than parent)		

PLEASE GO TO THE ATTACHED PAGE FOR PARENT INFORMATION. THANK YOU!