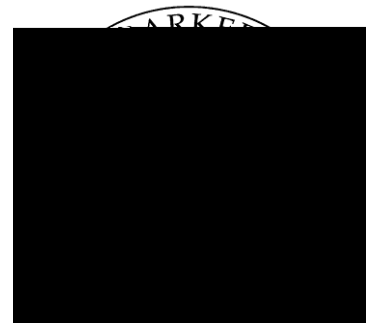


1628 Quaker Road, Barker, New York 14012-0328



Date: _____

Teacher: _____

Grade: _____

Student Name: _____ Birthdate: _____

Address: _____ Bus No. ____AM ____PM

Student Resides with: () Mother () Father () Other (please specify) _____

**** Legal verification of guardianship is necessary if other than parent. Custody papers are required and must be updated every year ****

ADULTS IN HOUSEHOLD

Full Name: _____

Full Name: _____

Relationship to Student: _____

Relationship to Student: _____

Email: _____

Email: _____

Phone: (H) _____ (C) _____

Phone: (H) _____ (C) _____

Employer: _____

Employer: _____

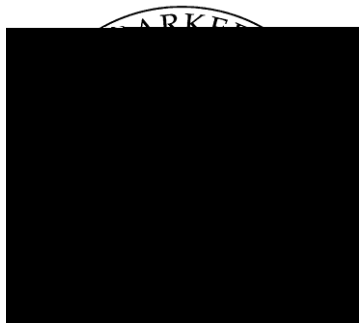
Employer Phone #: _____

Employer Phone #: _____

IN CASE OF EMERGENCY

Please provide **TWO**

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HEALTH INFORMATION