



Student Profile Form

Student Information

Date: _____ Child's Birthdate: _____

Child's Name: _____

School: _____ Grade: _____

Parent/Guardian Information

Parent(s) Name: _____

Address: _____

Home Phone: _____ Cell: _____

Work Place: _____ Work Phone: _____

E-mail: _____

Emergency Contact: _____ Phone: _____

Primary Sitter Information

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Cell/Other: _____ Cell/Other: _____

Can child go in without an adult being present? Yes _____ No _____

**Additional sheet must be signed if Yes is checked*

Office Use Only

Date entered in software: _____ Date rolodex card done: _____