



FAMILY PROFILE & RELEASE FORM

Child's Name: _____ Home Phone: _____

****Please list phone numbers in the sequence we should call.****

Mother's Name: _____

Phone Number

Type (work/home/cell/pager)

Workplace: _____ Email: _____

Father's Name: _____

Phone Number

Type (work/home/cell/pager)

Workplace: _____ Email: _____

In case of emergency and parent/guardian cannot be reached contact:

1. Name: _____ Relationship: _____

Address _____

Home Phone: _____ Cell Phone: _____

2. Name: _____ Relationship: _____

Address _____

Home Phone: _____ Cell Phone: _____

Person(s) authorized to take child from the school:

1. _____ 2. _____

3. _____ 4. _____

(Child will not be released to anyone except those listed above. Proper identification must be present at time of pick up.)

Names and ages of siblings: _____

Special interest your child has at this time: _____

Are there any special problems of which we should be aware, such as allergies, asthma, etc.? Yes/No

If yes, please explain: _____

Is your child on any regular medications? Yes or No Specify: _____