



Student File Cover Page

Student Name: _____

DOB / Age: ____/____/____ - ____ Years Old as of 9/1/20____

Home Address:

Home Phone:
Email:

Cell Phone:
Other:

School:

Grade:

Allergies / Special Needs / Other “Red List” Notes:

Emergency Contacts / Authorized pickup

Name: Relation: Parent Address: DPhone: Nphone: Cell: Email: Other:	Name: Relation: Parent Address: DPhone: Nphone: Cell: Email: Other:
Name: Relation: Address: DPhone: Nphone: Cell: Email: Other:	Name: Relation: Address: DPhone: Nphone: Cell: Email: Other:

Reminders:

- Liability Waiver signed? Original to LW book, copy to student file. (September 2007)
- Photographic Release signed? Original to photo book, copy to student file.
- Parent Handbook signed? Original to student file.
- Added parents to the general email list?
- Added to student/skill announcement email lists?
- Internet Services (Student Account)
- Textbooks (Syllabus , Dictionary, Others: _____)