

CHILD INFORMATION FORM

Name _____

Address _____

City, State, Zip _____

Home Phone _____

Parent's Cell Phone _____

Birthdate _____

Current Grade level (2009-2010 School year): _____

Parents or Guardians Email _____

Current Church Affiliation (if not Holy Cross) _____

School _____

What hobbies, sports, activities do you
enjoy? _____

Special needs/ allergies/medications:
