INFORMATION SHEET

(PARENT/LEGAL GUARDIAN)

LAST NAME	FIRST NAME	MIDDLE	
PLEASE SPECIFY F	RELATIONSHIP TO STUDENT:		
ADDRESS	CITY	STATE	ZIP
SSN:	DOB:	RACE:	SEX:
DRIVER'S LICENSE #:			
HEIGHT:	WEIGHT:	HAIR:	EYES:
(STUDENT)			
AST NAME	FIRST NAME	MIDDLE	
LAST NAME		MIDDLE	ZIP
ADDRESS	FIRST NAME	STATE	
ADDRESS	FIRST NAME	STATE RACE:	SEX:
LAST NAME ADDRESS SSN:	FIRST NAME CITY DOB: WEIGHT:	STATE RACE: HAIR:	SEX:
LAST NAME ADDRESS SSN: HEIGHT:	FIRST NAME CITY DOB:	STATE RACE: HAIR:	SEX:
LAST NAME ADDRESS SSN: HEIGHT:	FIRST NAME CITY DOB: WEIGHT:	STATE RACE: HAIR:	SEX:
LAST NAME ADDRESS SSN:	FIRST NAME CITY DOB: WEIGHT:	STATE RACE: HAIR:	SEX: