



Student Information Form

Student Name _____ Home Phone # _____

Cell Phone # _____ T-shirt size S M L XL 2XL

Date of Birth _____ Instrument _____

Year in School _____ E-mail Address _____

Mailing Address _____

City _____ Zip _____

Fathers Name _____ Home Phone # _____

Fathers Employer _____ Work Phone # _____

Fathers Cell # _____ Fathers e-mail _____

Fathers Mailing Address _____

City _____ Zip _____

Mothers Name _____ Home Phone # _____

Mothers Employer _____ Work Phone # _____

Mothers Cell # _____ Mothers e-mail _____

Mothers Mailing Address _____

City _____ Zip _____

(CIRCLE ONE)

Student lives with: BOTH PARENTS FATHER MOTHER GUARDIAN

In the case of an emergency please contact:
