

**CAMBRIA COUNTY CHRISTIAN SCHOOL
2012-2013 FAMILY INFORMATION SHEET**

PARENTS/GUARDIANS _____

ADDRESS: _____

TELEPHONES:

HOME: _____ FATHER CELL: _____

MOTHER CELL: _____ FATHER WORK: _____

MOTHER WORK: _____

E-MAIL: FATHER _____ MOTHER _____

CHILDREN (LIST ALL CHILDREN LIVING AT HOME)

<u>NAME</u>	<u>DOB</u>	<u>GRADE</u>	<u>SCHOOL</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHURCH _____

ADDRESS _____

PASTOR _____

ATTENDANCE [] REGULAR [] SOMETIMES [] OCCASIONALLY

FATHER'S EMPLOYER _____ **OCCUPATION** _____

ADDRESS _____

MOTHER'S EMPLOYER _____ **OCCUPATION** _____

ADDRESS _____

PATERNAL GRANDPARENTS

NAME _____

ADDRESS _____

MATERNAL GRANPARENTS

NAME _____

ADDRESS _____

EMERGENCY NUMBERS

In case we are unable to contact you, please list, in order of preference, who we should call in the event of accident or illness.

<u>NAME/RELATIONSHIP</u>	<u>TELEPHONE</u>
_____	_____
_____	_____
_____	_____