

Parent/Guardian Information

Parent Last Name: _____ Parent 1 First Name: _____

Parent 2 First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Home Fax: _____

Send mailings: Yes / No E-Mail address: _____

Parent 1

Check all that apply:

- Legal Guardian
- Primary Parent
- Additional Parent
- Other _____

Complete

Occupation: _____

Work Phone: () _____

(Optional info)

Work Fax: () _____

Beeper: () _____

Pin Code: _____

Cell Phone: () _____

Parent 2

Check all that apply:

- Legal Guardian
- Primary Parent
- Additional Parent
- Other _____

Complete

Occupation: _____

Work Phone: () _____

(Optional info)

Work Fax: () _____

Beeper: () _____

Pin Code: _____

Cell Phone: () _____

Any additional information: _____

It is not the policy of Cornell Cooperative Extension of Orange County to reveal names, addresses or telephone numbers as part of a public record or list.

Leader Signature _____ Date _____