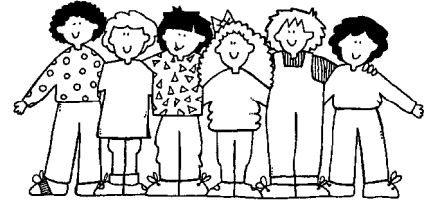


St. Paul's Lutheran Preschool

1700 Carridale Street SW

Decatur AL 35601

Phone: 256.353.1353



Student Information Form – 2010-11

Child's Name _____ first _____ middle _____ last _____

Name child is known by _____ Date of Birth _____

Parents or Guardians _____

Address _____ Phone _____

City & Zip _____ Cell _____

Employer (Father) _____ Employer (Mother) _____

Work Phone _____ Work Phone _____

Brothers and Sisters

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Child may be released to: (List Nickname or what the child calls him/her In parentheses)

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Whom to call when, in an emergency, the parent(s) cannot be reached:

Name _____ Phone _____

Name _____ Phone _____

Child's Physician _____ Phone _____

OTHER INFORMATION:

Favorite Food _____ Favorite Book _____

Pets and their names _____

Favorite Game or toy _____

Is your child left or right handed? _____ left _____ right _____ not sure

Anything else you would like us to know about your child: _____

Ministry Information

Ethnic Origin: _____ White _____ Black _____ Hispanic _____ Other _____

Church Affiliation _____ Member /____/ Attend only /____/

How often does your family attend services? _____

Child's Baptismal Date _____