

**Parent/Guardian Info**

Parent/Guardian Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Place Employed: \_\_\_\_\_ Occupation \_\_\_\_\_

Business Phone: \_\_\_\_\_ Extension: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Place Employed: \_\_\_\_\_ Occupation \_\_\_\_\_

Business Phone: \_\_\_\_\_ Extension: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

**Names, Addresses and Phone Numbers of two (2) people to contact if parents CANNOT be reached**

Name: \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Person(s) Authorized to Pick Up**

\_\_\_\_\_  
\_\_\_\_\_

- By checking this box, I allow my child's photo to be used for KUMC Promotional, website and social media events.
- I consent to have my child's photo used for in classroom use only including classroom app.