

## Hope Lutheran Church Student Information Sheet

Please fill out the information below. This information will be kept on file in the Education Coordinator office; it is only used to assist in providing communications between Hope's education ministry and the families it serves. When events take place away from Hope Lutheran, leaders will have copies of the emergency information. Thank you. **\*\*\*PLEASE CIRCLE YOUR PREFERRED METHOD OF CONTACT\*\*\***

PLEASE PRINT

Student's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Baptism Date & Location \_\_\_\_\_

Grade \_\_\_\_\_ School Attending \_\_\_\_\_

Student resides with  Both Parents  Father  Mother  Joint Custody  Other

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Additional Parents \_\_\_\_\_

Primary Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Mother's Cell \_\_\_\_\_ Father's Cell \_\_\_\_\_

Other Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Mother's Email \_\_\_\_\_ Father's Email \_\_\_\_\_

Student's Email \_\_\_\_\_ Student's cell \_\_\_\_\_

### EMERGENCY INFORMATION & PERMISSION

Mother's Employer \_\_\_\_\_ Phone \_\_\_\_\_

Father's Employer \_\_\_\_\_ Phone \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Medical Conditions of concern \_\_\_\_\_

Any known allergies \_\_\_\_\_

I give my child permission to attend/participate in Hope Lutheran Church education activities, any off-church property activities, field trips, service projects, etc. I understand it is my responsibility to provide insurance for my child. I will not hold Hope Lutheran Church or any of its representatives liable for any reason or in case of accident or injury. In the event of an emergency, I give emergency medical care permission to any teacher or representative of Hope Lutheran Church to seek emergency medical attention as deemed necessary if I cannot be reached. I give the church permission to use my phone number in a directory for other students and I give the church permission to use photos of my child for publications, newsletters, epistles, on the church Facebook page, and on the church website.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

The information on the front is correct and current.  
I have read and agree to the Permission Statement on the front.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Fees Paid \_\_\_\_\_

The information on the front is correct and current.  
I have read and agree to the Permission Statement on the front.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Fees Paid \_\_\_\_\_

The information on the front is correct and current.  
I have read and agree to the Permission Statement on the front.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Fees Paid \_\_\_\_\_

The information on the front is correct and current.  
I have read and agree to the Permission Statement on the front.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Fees Paid \_\_\_\_\_

The information on the front is correct and current.  
I have read and agree to the Permission Statement on the front.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Fees Paid \_\_\_\_\_