

**2015/2016
Student Data Form**



Student Information

First Name: _____ Last Name: _____

Gender: _____ Grade: _____ School: _____

Birthdate: ____/____/____ T-Shirt Size: (Circle One) Adult Sizes S - M - L - XL

Home Church: _____ Baptized: Yes / No Confirmed: Yes / No

Student Address

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

Student Interests

Church Involvement: _____

School Activities: _____

Sports & Hobbies: _____

Clubs and Organizations: _____



Primary Parent/Guardian

First Name: _____ Last Name: _____

Relationship to Student: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: _____ E-Mail Address: _____

Secondary Parent/Guardian

First Name: _____ Last Name: _____

Relationship to Student: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: _____ E-Mail Address: _____

Emergency Information

Emergency Contact 1: _____ Emergency Phone: _____

Emergency Contact 2: _____ Emergency Phone: _____