

# Kids' Campus Learning Center

## Child & Parent Information Sheet

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

E-mail Address for communication \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Home Address \_\_\_\_\_

Phone: Cell \_\_\_\_\_ Wk \_\_\_\_\_ Hm \_\_\_\_\_

Father's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Home Address \_\_\_\_\_

Phone: Cell \_\_\_\_\_ Wk \_\_\_\_\_ Hm \_\_\_\_\_

### Emergency Contacts

In the event that parent(s) cannot be reached, the following people will be called in the order listed, to pick your child up.

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

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

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

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

I only authorize the following person(s) to pick up my child:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Date**