

Contact Information for the Marple Home School Classes

Please print out this form and complete. Only one form needs to be completed per family, but all the students' names in the family and their ages should be written out. I will have the information on this form on class days in case of emergency.

(1) Student Name: _____ Age ____

(2) Student Name: _____ Age ____

(3) Student Name: _____ Age ____

(4) Student Name: _____ Age ____

Parents' or Guardian's Name _____

Address

Home phone _____ Cell Phone _____

Email address _____

Emergency Contact if parent cannot be reached

If there is a medical condition or allergy that you think that John McCormick or William Walter should know of, please write down the information below.

