Woodland Baptist Christian School
Student/Family Information Sheet
2009-2010

Dear parent:

Please fill in the required information and return it to the student's teacher. We need this information on file in the school office.

Student Information

Student's Name: _____ _____ _____ Student's Grade: _____
Last First Middle

Student's Sex: _____ Student's Age: _____ Date of birth: _____ Soc. Sec.#: _____

Student's cell phone number: _____ Student's e-mail address: _____

Student's place of birth: _____ _____ Student's home telephone number: _____
City State

Student's mailing address: _____ _____ _____ _____
Street/PO Box # City State Zip

Student's physician: _____ Telephone number: _____

List any allergies: _____

List any physical/learning disabilities: _____

If parents are separated or divorced, with whom does the child live? _____

Emergency contact person: _____ Relationship: _____ Telephone number: _____
(other than parents)

To whom can the child be released: _____

Time the student arrives at school: _____ Time the student departs from school: _____ Daycare: Full time_____ Hourly_____

School previously attended: _____ _____ _____
Name City State

Date enrolled in Woodland Baptist Christian School: _____ _____
Year Grade

Church student attends: _____ Born again believer? _____

Over

Family Information

Father's name: _____ _____ _____
Last First Middle

Cell number: _____ Father's e-mail address: _____

Father's place of employment: _____ Telephone number: _____

Church father attends: _____ Born again believer? _____

Mother's name: _____ _____ _____
Last First Middle/Maiden

Cell number: _____ Mother's e-mail address: _____

Mother's place of employment: _____ Telephone number: _____

Church mother attends: _____ Born again believer? _____

Marital status: Married: _____ Separated: _____ Divorced: _____ Single parent: _____

Guardian's name if applicable): _____ _____ Cell number: _____
Last First

Guardian's place of employment: _____ Telephone number: _____

Name and ages of other children (if applicable): _____

Statement of Parent (s)/Guardians

In making application for my child, it is my desire that he/she complete the school year. In signing this statement, I understand that:

* My reason for selecting WBCS is primarily to give my child a Christ centered education and to compliment the Christian teachings which the Bible sets forth for the Christian home and church.
* My participation in is needed in lending practical help and prayer support in a mutual effort to train our children. Because of this, I will endeavor to attend parent-teacher meetings and planned parent-teacher conferences unless providentially hindered.
* I will be responsible to see that my child abides by the school's standard of conduct and dress
* I give my child permission to take part in all school activities, including sports, field trips, and will not hold the school liable to me or to my child because of any injury to my child at school or during any school activity.

Mother's signature: _____ Date: _____

Father's signature: _____ Date: _____

Guardian's signature: _____ Date: _____