

Mountain Pathways School

2011/2012 Family Update Form

(Please fill out for each child)

Child's Full Name _____

Date of Birth _____

Month & Year of Enrollment at MPS _____

School District (name of school) _____

Mother's Name _____ Father's Name _____

Mother's Address _____ Father's Address _____

Mother's Home Phone # _____ Father's Home Phone # _____

Mother's Mobile Phone# _____ Father's Mobile Phone# _____

Mother's Email Address _____ Father's Email Address _____

Mother's Employer

Father's Employer

Company _____

Company _____

Address _____

Address _____

Phone _____

Phone _____

Siblings

Name _____ Age _____ School or Preschool _____

Name _____ Age _____ School or Preschool _____

Name _____ Age _____ School or Preschool _____

Please list the day care centers and/ or schools that your child has attended, part time or full time.

Who, other than the parents, is authorized to pick up your child? (We cannot release your child to anyone not on this form unless you provide, in advance, written authorization.)

1. _____ 3. _____

2. _____ 4. _____

Please list name and daytime phone number of 2 local individuals whom we can contact in case of emergency.

1. _____

2. _____