2021 MOST HOLY REDEEMER SCHOOL 2022 FAMILY INFORMATION

CHILDREN'S NAMES

| First Name | Last Name | Grade | Room # |
|------------|-----------|-------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

PARENT / GUARDIAN 1 INFORMATION

| Full name | |
|---------------------------------------|--|
| Street | |
| Cellphone number | |
| Business telephone / extension | |
| Email address | |
| Place of Employment | |

Alumni of MHR? N Y Year Graduated_____

PARENT / GUARDIAN 2 INFORMATION

| Full name | |
|---------------------------------------|--|
| Street | |
| Cellphone number | |
| Business telephone / extension | |
| Email address | |
| Place of Employment | |

Alumni of MHR? N Y Year Graduated_____

In case of illness/injury, *if you are not available or we were unable to get in with contact you*, in whose care may we place your child?

FIRST CAREGIVER'S INFORMATION

| Full name | |
|--|--|
| Relationship to child (e.g. grandparent, | |
| aunt, uncle, neighbor) | |
| Home telephone number | |
| Cellphone number | |

SECOND CAREGIVER'S INFORMATION

| Full name | |
|--|--|
| Relationship to child (e.g. grandparent, | |
| aunt, uncle, neighbor) | |
| Home telephone number | |
| Cellphone number | |

Allergies, chronic health conditions, other health information (attach additional sheets, if necessary):

Please list any other information that may be helpful to school personnel (attach additional sheets, if necessary):

I give permission for my child/ren to take walks in the neighborhood, as part of class activities, throughout the school year.

Parent's signature