



P. G.
Parent/Guardian Information Sheet



Greetings Parents/Guardians:

This information will be used in case of emergency or notifications of cancellations of events, activities at the last minute. Information will be kept strictly confidential and will be used only for the purpose it is intended.

Participant Information:

Name: _____

Parent/Guardian Information:

Name: _____

Relationship to Participant: Mother Father Other: _____

Main Primary Contact Number: _____

E-Mail Address: _____ @ _____ . _____

Are you able to receive text messages? Yes No

Name: _____

Relationship to Participant: Mother Father Other: _____

Main Primary Contact Number: _____

E-Mail Address: _____ @ _____ . _____

Are you able to receive text messages? Yes No

Name: _____

Relationship to Participant: Mother Father Other: _____

Main Primary Contact Number: _____

E-Mail Address: _____ @ _____ . _____

Are you able to receive text messages? Yes No