

Peabody Children's Chorus: Family Information Sheet 2009-2010

***MUST BE COMPLETED BY A PARENT OR GUARDIAN
PLEASE PRINT ALL INFORMATION CLEARLY***

- Campus (Circle one): Towson Howard County
- Ensemble (Circle one): Training Choir Choristers Chamber Singers

- Student's name as it will appear in concert programs (no middle names please)

First Name _____ Last Name _____

- Student's Home Address _____

City State Zip

- Child's home telephone number (_____) _____-_____

- Mother/Guardian: • Father/Guardian:
Name _____ Name _____
Work phone (____) _____-_____ Work phone (____) _____-_____
Cell phone (____) _____-_____ Cell phone (____) _____-_____

- We will send information to your family via e-mail. Please **print** clearly all e-mail addresses you would like us to include on our mailing list (including student e-mail addresses, if appropriate).

List the main e-mail address first (we will print this one in our directory)

1. main e-mail address: _____
2. _____
3. _____

- Student's Age _____ Date of Birth ____/____/____ Student's School _____

- **May we print your information in our Directory?** YES__ NO__

- If parents cannot be reached, please list an alternate person we may contact to pick up your child in an emergency.

Name: _____ Phone: (____) _____-_____

- Does your child have any medical condition we should be aware of? If so, please describe on back of this form (this information is confidential).
- In emergencies requiring immediate medical attention, your child will be taken to the nearest hospital emergency room. Your signature below authorizes the responsible person at the Peabody campus to have your child transported to that hospital.
- PARENT/GUARDIAN SIGNATURE _____ DATE ____/____/____

