



Parent/Guardian Information – Different Household

List all adults who have a guardian relationship to the student and live in a DIFFERENT household than the student.

PARENT/GUARDIAN FULL NAME	RELATIONSHIP TO STUDENT	GENDER (M/F)	CELL #	WORK #	EMAIL
Should this person receive mailings about the student (i.e. report cards, attendance letters, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, list mailing address:					
Should this person receive mailings about the student (i.e. report cards, attendance letters, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, list mailing address:					

Address Apartment/Floor #

City State Zip

Other Members of the Household

Please list all other people living in the same house as the student, including ALL siblings. Does the student have any siblings currently attending an AF school? If yes, list their names: _____

FULL NAME	RELATIONSHIP TO STUDENT	GENDER (M/F)	APPROVED PICK-UP?	EMERGENCY CONTACT?	CELL #	WORK #	Date Of Birth (Siblings Only)
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			



Emergency Contacts and Approved Pick-Ups

Please list your emergency contacts (at least one) and all people approved to pick up the student from school. Authorized pick-ups must be at least 14 years of age, and photo ID will be required at pick-up.

Please check this box if only the parents/guardians listed on the previous page are allowed to pick up the student.

FULL NAME	RELATIONSHIP TO STUDENT	GENDER (M/F)	APPROVED PICK-UP?	EMERGENCY CONTACT?	CELL #	WORK #
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		

