



## Windsor Academy Student Information 2017-2018

Student's Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home Telephone # \_\_\_\_\_

School District \_\_\_\_\_

Birth Date \_\_\_\_\_

<b>Parent Information</b>
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Name \_\_\_\_\_

Work # \_\_\_\_\_

Cell # \_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Work # \_\_\_\_\_

Cell # \_\_\_\_\_

E-mail \_\_\_\_\_

**Allergies/Medical Information:**

**Emergency Back-up Contacts:**