



# Forest Lake

EDUCATION CENTER

## Student Information Update Form

Please complete **ONE** form per family

Date: \_\_\_\_\_

Student(s) Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Parent Name: \_\_\_\_\_

**Add NEW information only** – *it is not necessary to fill out the entire form*

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mom's Cell: \_\_\_\_\_

Mom's Work: \_\_\_\_\_

Mom's Email: \_\_\_\_\_

Dad's Cell: \_\_\_\_\_

Dad's Work: \_\_\_\_\_

Dad's Email: \_\_\_\_\_

Authorized Pick-up – *name and number*: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Required Parent/Guardian Signature:

\_\_\_\_\_

**Office Use Only:**     Registrar     Finance     Clinic     Aftercare