



"A Child's Touch..." Christian School

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www.AChildsTouch.com

*Inspiring young minds
through Creative approaches*



DATA INFORMATION SHEET

New Family _____ Existing Family _____ Referred By: _____
 Today's Date: _____ Enrollment Date (if new): _____
 Child's Name: _____ Birth Date: _____
 Gender: _____ Ethnicity: _____
 Address: _____ City/Zip: _____

Parent/Guardian 1 (first contact): _____

Relationship: _____ Address: _____
 Cell # _____ City/Zip: _____
 Cell Phone Carrier _____ Email: _____
 Home # _____ Employer: _____
 Work # _____

Parent/Guardian 2 (second contact): _____

Relationship: _____ Address: _____
 Cell # _____ City/Zip: _____
 Cell Phone Carrier _____ Email: _____
 Home # _____ Employer: _____
 Work # _____

Required information to help us understand the family dynamics as well as who to contact regarding concerns.

Parent Status-Parents are: (Please Circle) Single Married Separated Divorced Other

Who is enrolling the child? (Please Circle) Parent/Guardian 1 Parent/Guardian 2 Other

If other, enrolling person's name and relationship: _____

Who is responsible for payment? (Please Circle) Parent/Guardian 1 Parent/Guardian 2 Other

If other, responsible person's name and relationship: _____

Is there any legal paperwork pertaining to your child that we should be aware of? (this can include custody agreements, restraining order, IEP paperwork, etc.

(Please Circle) Yes No

If yes, please explain: _____

Emergency Contacts that **MAY** pick up your child (list in the order we should call in the event parents/guardians cannot be reached)

** You must list at least 1 person in this section*

Name: _____

Relationship: _____

Cell # _____

Home # _____

Name: _____

Relationship: _____

Cell # _____

Home # _____

Name: _____

Relationship: _____

Cell # _____

Home # _____

Name: _____

Relationship: _____

Cell # _____

Home # _____

Name: _____

Relationship: _____

Cell # _____

Home # _____

Name: _____

Relationship: _____

Cell # _____

Home # _____

Parent Name (printed) _____

Authorized Family Signature _____ Date _____