



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

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[www.AChildsTouch.com](http://www.AChildsTouch.com)

*Inspiring young minds  
through Creative approaches*



## DATA INFORMATION SHEET 2024-2025 SCHOOL YEAR

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 one (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 \_\_\_\_\_