

PARENT INFORMATION

MOTHER: _____ DOB: ____/____/____ PHONE #: _____

EMAIL: _____

FATHER: _____ DOB: ____/____/____ PHONE #: _____

EMAIL: _____

CHILD INFORMATION

NAME	DOB	GENDER	GRADE	SCHOOL
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

ADDITIONAL NOTES, ALLERGIES, OR SPECIAL NEEDS:

PHOTO RELEASE: Will you allow Good News to take photos of your child for publicity, such as pictures on social media or on our website?

YES _____ NO _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____