



Louisville Adventist Academy FAMILY INFORMATION SHEET

Family Home Address _____
Street City State Zip

Pupil's Legal Name _____
Last First Middle Nickname

Sex: F _____ M _____ Student Baptized? Y/N Date of Baptism _____

Date of Birth ___/___/___ Place of Birth _____
City State Country

Cell Phone Number: _____ Email Address: _____

Pupil's Legal Name _____
Last First Middle Nickname

Sex: F _____ M _____ Student Baptized? Y/N Date of Baptism _____

Date of Birth ___/___/___ Place of Birth _____
City State Country

Cell Phone Number: _____ Email Address: _____

Pupil's Legal Name _____
Last First Middle Nickname

Sex: F _____ M _____ Student Baptized? Y/N Date of Baptism _____

Date of Birth ___/___/___ Place of Birth _____
City State Country

Cell Phone Number: _____ Email Address: _____

Family Information	Father/Guardian	Mother/Guardian
Legal Name		
Relation to Child	Natural ___ Step ___ Foster ___ Rel. to Child (Guardian) _____	Natural ___ Step ___ Foster ___ Rel. to Child (Guardian) _____
Home Address if different from above		
Birthdate		
Birthplace		
Home Phone #		
Cell Phone #		
Work Phone #		
Email Address		
Occupation		
Business Address		
Business Telephone		
Race/Ethnicity		
Church Affiliation	SDA ___ None ___ Other _____	SDA ___ None ___ Other _____
Church Membership (location)		
Marital Status	Married ___ Divorced ___ Other ___	Married ___ Divorced ___ Other ___