☼ TREVOSE DAY SCHOOL

Today's Date: _____

Student's Full Name _____

FIRST   LAST   CHILD GOES BY

Student's Address _____

STREET   HOME PHONE

_____

CITY   STATE   ZIP CODE

_____

GENDER   BIRTH DATE

Parent/Guardian _____

FIRST   LAST

_____

E-MAIL   PHONE

Request For EIN # (tax purposes)   ☐ YES   ☐ NO

_____

PARENT/GUARDIAN SIGNATURE   DATE