


Central United Methodist Church

2020-2021 Family/Student Information Form

 201 N Market St. Oskaloosa, IA 52577 (641) 672-2564 Rev. Chad Lierman	Student(s) Information				
	Last Name	First Name	Gender (M/F)	Birthday	Grade ('20-21)
Allergy/Medical Concerns:			Additional Information:		

Parent/Guardian #1 Information	
Full Name:	Birthday:
Relation to Student(s): Parent Foster Parent Legal Guardian Other: _____	
Marital Status: Married Single Divorced Widowed Separated	Religion/Home Church:
Address: _____	City : _____ State: _____ Zip Code: _____
Home Phone: _____	Cell Phone: _____ Email: _____
Employer/School: _____	Work/School Phone: _____

Parent/Guardian #2 Information	
Full Name:	Birthday:
Relation to Student(s): Parent Foster Parent Legal Guardian Other: _____	
Marital Status: Married Single Divorced Widowed Separated	Religion/Home Church:
Address: _____	City : _____ State: _____ Zip Code: _____
Home Phone: _____	Cell Phone: _____ Email: _____
Employer/School: _____	Work/School Phone: _____

Emergency Contact:	Phone Number:	Relationship to Student(s):
Emergency Contact:	Phone Number:	Relationship to Student(s):

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Thank you!