



Union Day School
8120 Kensington Dr.
Waxhaw, NC 28173
704-256-1494
www.uniondayschool.com

FAMILY CONTACT INFORMATION

PLEASE PRINT CLEARLY

Student Name: _____
(Last) (First) (Middle)

Student's Date of Birth (mm/dd/yyyy) _____ Gender: Female ____ Male ____

Home Address:

Street: _____

City: _____ State: _____ Zip Code _____

Siblings currently enrolled: _____

MOTHER * STEPMOTHER * FEMALE GUARDIAN: (Please circle appropriate response)

First Name: _____ Last Name: _____

Primary Phone: _____ Secondary Phone: _____

Email Address: (please print) _____

FATHER * STEPFATHER * MALE GUARDIAN: (Please circle appropriate response)

Parent: First Name: _____ Last Name: _____

Primary Phone: _____ Secondary Phone: _____

Email Address: (please print) _____

CUSTODY INFORMATION: _____
