

**The Cheshire High School  
Band Parents' Association, Inc.**



**Form 2  
Student Data Sheet – 2011/12**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent(s)/Guardian(s) names: \_\_\_\_\_

Address: \_\_\_\_\_

Cheshire, CT 06410

Telephone Numbers:

	Home Phone	Work Phone	Cell Phone	Pager
Mother				
Father				

Parent Email: \_\_\_\_\_

Parent Email : \_\_\_\_\_

Student Email: \_\_\_\_\_

Please provide the name and telephone numbers of at least one emergency contact person [if parent/guardian is unavailable]:

Name	Relationship	Home Phone	Work Phone	Cell Phone	Pager

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_