



COUNTRY DAY SCHOOL
Upland Country Day School • 420 West Street Road • Kennett Square, PA 19348

REQUIRED FAMILY ENROLLMENT DATA

Please complete this form for any student(s) you are enrolling or re-enrolling at Upland for the 2010-2011 school year

Student (*legal names please. A space is allotted for nicknames*)

Last Name	First Name	Middle	Nickname	'11-'12 Grade	DOB	Gender
1. _____						
2. _____						
3. _____						
4. _____						

Primary Home Address of Student(s)

Street _____ City _____ State _____ Zip _____

Home Phone _____ School District where you reside _____

Email preferred for school correspondence:

Mother _____ **Father** _____

Secondary Address

Street _____ City _____ State _____ Zip _____

Mother/ Parent 1/Guardian

Last Name _____

First Name _____

M.I. _____ Nickname _____

Address (if different from above)

Cell Phone _____

Employer's Name _____

Work Phone _____

Work Fax _____

Father/ Parent 2/Guardian

Last Name _____

First Name _____

M.I. _____ Nickname _____

Address (if different from above)

Cell Phone _____

Employer's Name _____

Work Phone _____

Work Fax _____

Parents: Marital Status

Married Divorced Separated Widowed Single

With Whom Child/Children are Living (Check more than one box if applicable)

Both Parents Mother/Parent 1 Father/Parent 2
 Stepparent(s) Guardian(s) Significant Other

THIS PORTION OF THE FORM WILL BE DETACHED AND SENT TO THE DEVELOPMENT OFFICE TO USE FOR SPECIAL EVENTS, MAILINGS AND OTHER DEVELOPMENT OFFICE AND PARENTS' ASSOCIATION ACTIVITIES.

Please list other children in the family:

Name	DOB	Gender	School	Grade
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Names of relatives who have attended Upland Country Day School (with class year if known):

Please list the names and addresses of relatives who would be interested in attending special school functions and/or receiving mailings.

Grandparents or Other Relatives

Maternal Grandparents

Name _____
Street Address _____
City, State and Zip Code _____
Home Phone(s) _____

Paternal Grandparents

Name _____
Street Address _____
City, State and Zip Code _____
Home Phone(s) _____

Other Relatives

Name _____
Relationship to student(s) _____
Street Address _____
City, State and Zip _____
Home Phone(s) _____

Other Relatives

Name _____
Relationship to student(s) _____
Street Address _____
City, State and Zip _____
Home Phone(s) _____

Charitable/Volunteer Experience

Mother/Parent 1/Guardian

College Hospital Religious Organization School Youth Other

Organization	Dates of Service	Role(s)	Board Member? (Y/N)
_____	_____	_____	_____
_____	_____	_____	_____

Father/Parent 2/Guardian

College Hospital Religious Organization School Youth Other

Organization	Dates of Service	Role (s)	Board Member? (Y/N)
_____	_____	_____	_____
_____	_____	_____	_____

Parental School Volunteer / Special Interests

Mother/Parent 1/Guardian

Father/Parent 2/Guardian

Athletics	<input type="checkbox"/>	<input type="checkbox"/>
Alumni Relations	<input type="checkbox"/>	<input type="checkbox"/>
Development	<input type="checkbox"/>	<input type="checkbox"/>
Parents' Association	<input type="checkbox"/>	<input type="checkbox"/>
Performing Arts	<input type="checkbox"/>	<input type="checkbox"/>
Public Relations / Communications	<input type="checkbox"/>	<input type="checkbox"/>
Visual Arts	<input type="checkbox"/>	<input type="checkbox"/>
Academic / Other	<input type="checkbox"/> Subject(s)_____	<input type="checkbox"/> Subject(s)_____

Do you have a special area of knowledge, interest or experiences that you would be willing to share with Upland students?

Billing and Correspondence Instructions

School Correspondence To Be Sent To	<input type="checkbox"/> Mother/Parent 1	<input type="checkbox"/> Father/Parent 2	<input type="checkbox"/> Both	<input type="checkbox"/> Other
Billing To Be Sent To	<input type="checkbox"/> Mother/Parent 1	<input type="checkbox"/> Father/Parent 2	<input type="checkbox"/> Both	<input type="checkbox"/> Other

Special Mailing Instructions (if different from home address above)

The parent contact information included on this form will be published in the School Directory and is intended for the sole use of current parents and faculty members of Upland Country Day School for purposes related to the School and its programs. Upland Country Day School considers the remainder of the information on this form confidential and will not distribute or sell the information provided.

Upland Country Day School does not discriminate on the basis of race, religion, national origin, ethnicity, gender, or sexual orientation with regard to admission or the terms and conditions of the educational setting.