



# OUR LADY OF MT. CARMEL SCHOOL DIRECTORY INFORMATION 2019-2020

**PARENTS:** Mother \_\_\_\_\_

Father \_\_\_\_\_

STUDENT INFO	NAME	DOB	GRADE
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_____	_____	_____

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_

CELL (MOM) \_\_\_\_\_ CELL(DAD) \_\_\_\_\_

E-mail (MOM) \_\_\_\_\_ (DAD) \_\_\_\_\_

Parent's place of employment:

Mother \_\_\_\_\_ phone \_\_\_\_\_

Father \_\_\_\_\_ phone \_\_\_\_\_

Person to contact if parents are unavailable:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Catholic \_\_\_\_\_ Non-Catholic \_\_\_\_\_

What Parish/Church are you a member of: \_\_\_\_\_