



St. Michael's Episcopal School 2018-2019 Data Form

It is important for St. Michael's to maintain accurate and current information about our families.
Please help us by completing this form **(one per family)**.

PARENT/GUARDIAN A (FULL name, including title) _____

St. Michael's Alumna/Alumnus ___yes ___no Year _____

Place of Employment _____

Position _____

Does your employer offer a matching gift program? ___yes ___no

PARENT/GUARDIAN B (FULL name, including title) _____

St. Michael's Alumna/Alumnus ___yes ___no Year _____

Place of Employment _____

Position _____

Does your employer offer a matching gift program? ___yes ___no

St M Student Name _____ Grade _____

St M Student Name _____ Grade _____

St M Student Name _____ Grade _____

St M Student Name _____ Grade _____

GRANDPARENTS often are interested in receiving news about their grandchildren's school. **If you are a "new" St M parent or have never shared grandparent information, please complete the following.**
Returning families, please note any changes (addresses, deaths, and/or names) that may have occurred from information previously submitted.

Formal Salutation (including titles) _____

First Name(s) _____ Email _____

Address _____

City _____ State _____ Zip _____ Phone _____

Formal Salutation (including titles) _____

First Name(s) _____ Email _____

Address _____

City _____ State _____ Zip _____ Phone _____

Formal Salutation (including titles) _____

First Name(s) _____ Email _____

Address _____

City _____ State _____ Zip _____ Phone _____

Formal Salutation (including titles) _____

First Name(s) _____ Email _____

Address _____

City _____ State _____ Zip _____ Phone _____