

U G H S

Unity Grit Helpfulness Self-Respect

Click to digitally complete.

<https://forms.gle/bWkBfP8H1qAyQs23A>

Cadet /Emergency Contact Data Entry

Last Name: _____ First Name: _____ MI: _____

Birthday: _____ Gender: Male/Female/Prefer not to say/Other (Circle One)

Home Address: (Include any Cell Phone Numbers where a parent or emergency contact may be reached)

Street: _____ Apartment # _____

City: _____ State: GA Zip: _____

Home Phone: _____

Best Parent/Guardian Contact phone number: _____

Parent Guardian: _____

Relationship: Father/Mother/Aunt/Uncle/Grandparent/Guardian/Other

Street: _____ Apartment # _____

City: _____ State: GA Zip: _____

Home Phone: _____

Emergency Contact: _____

U G H S

Unity Grit Helpfulness Self-Respect

Street: _____ Apartment # _____

City: _____ State: GA Zip: _____ Phone: _____

Email: _____

Email: _____