



STUDENT AND PARENT INFORMATION SHEET

Student Name :	Luz Greene	DOB :	01/01/2012
Student Address :	Texas		
Student Phone :	8784545454	Student Gender :	Male
Student Class :	NA		
Country :	United States	State :	Alaska
City :	Alcan	Zip Code :	550022

PRIMARY PARENT DETAILS

Parent Name :	Ricky Pointing	Mobile :	7854877777
Email Address :	ricky@yopmail.com		
Address :	Texas		
Country :	United States	State :	Arkansas
City :	Alleene	Zip Code :	550222
DOB :	11/06/2019	Profession :	Engineer
Gender :	Male	Employer Name :	Samrty
Employer Number :	8787878454	Relation With Student :	Father

Primary Care Physician : Dr Willy Phone: 8745454544

Preferred Hospital : Miyo

Allergies : NA

If your child has a medical condition such as ashtma, diabetes, seizures, heart problems, recurring illness etc, please describe: NA

Other important medical information you would like us to have : NA