



Ranger Kids Information

Kinder thru 2nd Grade

Today's Date:

Name:	Attach Photo of Boy Here
Nickname (if you have one):	
Address:	
City: State: Zip Code:	
Mobile No.: Home No.:	
Day of Birth:	
School: Grade:	
Allergies / Medical Considerations:	

Parents Information

Father's Name:	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed
Address:	
City: State: Zip Code:	
Mobile No.: Home No.:	
Personal Email:	

Mother's Name:	List name and ages of brothers and sister. (Name & Age)
Address:	
City: State: Zip Code:	
Mobile No.: Home No.:	
Personal Email:	