Student/ Military Information

	Student Information	Parents
Last Name		Parents name
First Name		First Name(s):
Gender	Male ☐ Female ☐	
Birthday: (mm/dd/yyyy)	Date: ___/____/_____	
Preferred or Nickname		
School Attending		
Major		
Mailing address For UPSP (regular Mail):		
name		
Street		
Street		
City, State		
Street		
Package Address (UPS, DHL, FedEx):		
Name		Special instruction required for delivery:
Street		
Street		
City, State		
Zip		
Cell Phone:	( ) - Texting? Yes☐ No☐	
Student Email		
Parents e-mail:		
Food Allergies		