Big Brothers Big Sisters of North Central Michigan

230 Huron Street Grayling, MI 49738 (989) 344-5112

Little Brother/Little Sister Application Form

Child's name:_____ Age:_____ Birthdate:_____
First Last

Address:_____ Phone:_____
Street City Zip

Mailing Address (If different from street address) _____

School:_____Grade:_____School Year:_____Teacher:_____

Is child eligible for free or reduced lunch? Yes_____No_____

Mother:_____ Father_____

Parent's Marital Status:____Married _____Single _____ Divorced_____Widowed _____Separated

Your Employer:_____ Work Phone:_____

Other Members of Household

_____
Name Sex Age Relationship to child (brother, sister, uncle, etc.)

_____
Name Sex Age Relationship to child

_____
Name Sex Age Relationship to child

_____
Name Sex Age Relationship to child

Please list any clubs or extra-curricular activities your child is involved in:
_____

Hobbies: 1._____3._____5._____

2._____4._____6._____

Best time of day for agency caseworker to contact you:_____

Parent/Guardian Signature:_____ Date:_____