



Family Information Sheet

CATEGORY	SPOUSE	MEMBER
Name		
Military Status		
Cell Phone		
Home Phone		
Work Phone		
E-mail Address		
Home Address		
DEROS		
Special Needs		

CHILDREN

Name	Gender	Age	School/Daycare	Special Needs

OTHER HOUSEHOLD GUEST

Name	Gender	Relationship to Household	Special Needs

PETS

Name	Gender/Age	Type of Pet	Special Needs

_____ **Check here if you would like to be connected to other spouse's in your local area.**
 Contents shall not be disclosed, discussed, or shared with individuals unless they have a direct need-to-know in the performance of their official duties



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