

Madeira School Guardian Information

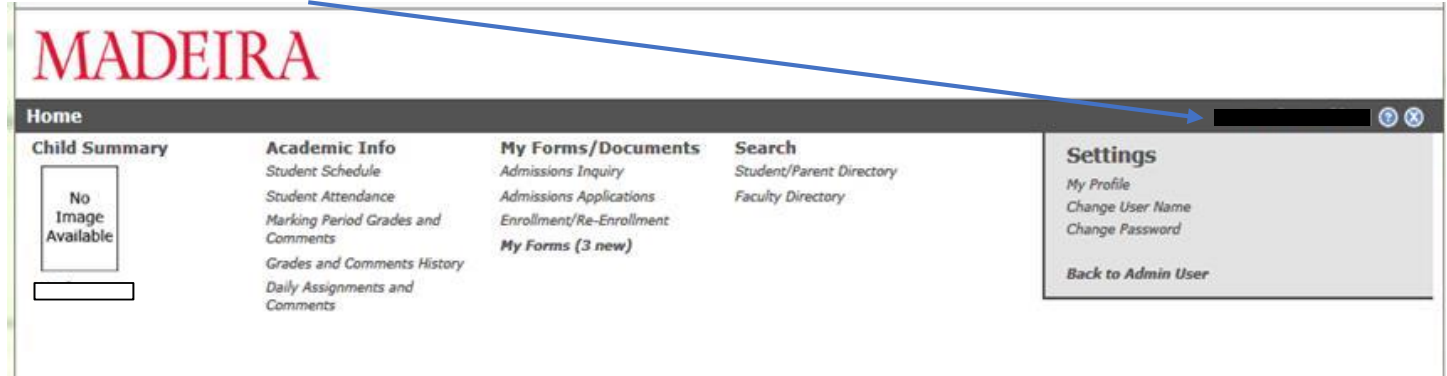
As stated in The Madeira School Student/Parent Handbook, all international students, as well as those domestic boarders who live a significant distance away (3+ hours), are required to have a local guardian (an adult relative or friend of the immediate family) who lives within two hours of Madeira. By signing this form, the guardian is agreeing to take the student off campus and assume responsibility for her care if the student is ill and cannot be served by The Madeira School's Health Center, if the School is closed for an emergency, or if the School deems it inappropriate for the student to remain on campus due to disciplinary reasons. The family's identification of a guardian constitutes authorization and consent to the School's placing the student in the care of the guardian whenever the School, in its discretion, determines the student's health or emergency conditions make it appropriate to do so. If the primary guardian is unavailable or unwilling to take responsibility for the student when a student must leave campus, the family is responsible for informing the school and for securing a suitable replacement. To be eligible to begin classes in September, students who live outside the US must have a guardian listed on their MyBackpack account, instructions for doing so are listed below.

1) To add/update guardian information, please sign-in to MyBackpack

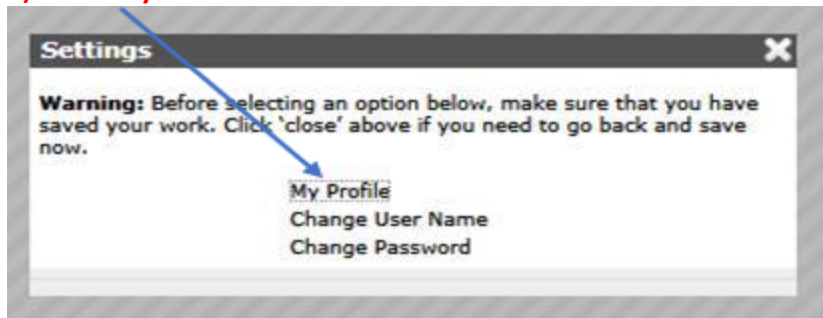
<https://madeira.seniormbp.com/SeniorApps/facelets/registration/loginCenter.xhtml>



2) Click on your name here



3) Click "My Profile"



4) Click "Edit"

MADEIRA

My Profile

[Back to Admin User](#)

[Edit](#) [Preview](#) [Send note to school](#)

DNP

Father: [Redacted]
Title: Mr.
First Name: [Redacted]
Last Name: [Redacted]
Relation: [Redacted]

Mother: [Redacted]
Title: Ms.
First Name: [Redacted]
Last Name: [Redacted]
Relation: [Redacted]

Residential Address

Address 1: [Redacted]
 City/State: [Redacted]
 Zip: [Redacted]
Used to contact you in an emergency? No

Work Address

Company Name: [Redacted]
 Occupation: [Redacted]
 Job Title: [Redacted]
 Phone: [Redacted]
Used to contact you in an emergency? No

Additional Contact

[Back to Admin User](#)

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[Printable Version](#)

5) Click "Add"

[Save](#) [Done](#) [Cancel](#)

DNP

Father: [Redacted]
Title: Mr.
First Name: [Redacted]
Middle Name: [Redacted]
Last Name: [Redacted]
Suffix: [Redacted]
Nickname: [Redacted]
Relation: Father

Mother: [Redacted]
Title: Ms.
First Name: [Redacted]
Middle Name: [Redacted]
Last Name: [Redacted]
Suffix: [Redacted]
Nickname: [Redacted]
Relation: Mother

Residential Address

Address 1: [Redacted]
 Address 2: [Redacted]
 Address 3: [Redacted]
 City/State: [Redacted] VA
 Zip: [Redacted]
 Country: [Redacted] (Leave blank for USA)
Used to contact you in an emergency? No

Ahmar: [Redacted] Send E-Mails
 Nabeela: [Redacted] Send E-Mails
 Phone: [Redacted]
 Fax: [Redacted]
 Type/Number: Mother Cell [Redacted]
 Type/Number: Father Cell [Redacted]
 Type/Number: [Redacted]
 Type/Number: [Redacted]

Work Address [Delete](#)

Company Name: [Redacted]
 Address 1: [Redacted]
 Address 2: [Redacted]
 Address 3: [Redacted]
 City/State: [Redacted]
 Zip: [Redacted]
 Country: [Redacted] (Leave blank for USA)
Industry: [Redacted]
Occupation: [Redacted]
Job Title: [Redacted]
 E-Mail 1: [Redacted] Send E-Mails
 E-Mail 2: [Redacted] Send E-Mails
 Phone: [Redacted]
 Fax: [Redacted]
 Type/Number: [Redacted]
 Type/Number: [Redacted]
 Type/Number: [Redacted]
 Type/Number: [Redacted]
Used to contact you in an emergency? No

[Add](#)

Additional Contact

[Add](#)

6) This is where you can add a local guardian. Please add ALL contact information for your daughter's local guardian (name, address, phone, & email), make sure you type in "Local Guardian" as the Relation, then click "Save" button.

Additional Contact [Delete](#)

Title:

First Name:

Middle Name:

Last Name:

Suffix:

Nickname:

Relation:

Address 1:

Address 2:

Address 3:

City/State:

Zip:

Country: (Leave blank for USA)

Used to contact you in an emergency? No

[Add](#)

[Back to Admin User](#)

Title:

First Name:

Middle Name:

Last Name:

Suffix:

Nickname:

Relation:

E-Mail 1: Send E-Mails

E-Mail 2: Send E-Mails

Phone:

Fax:

Type/Number:

Type/Number:

Type/Number:

Type/Number:

7) By default, guardians will receive the same email communication that parents receive from Madeira. If you want to opt-out of this, please *uncheck* these boxes.

7) If you would like to add any additional information, please click on "send note to school" and then click "Submit".

Send note to school ✕

If you need assistance with your profile, please enter a note to the school in the space provided below.

[Submit](#)

[Printable Version](#)

8) Please send a copy of Driver's License by mail to: Dean of Students Office, 8328 Georgetown Pike, McLean, VA 22102 or email it to: DOS@madeira.org. If you have any questions, please call us at 703-556-8211.