PERMISSION FOR INCLUSION ON CLASS LIST

Please return to your class teacher. Thank you for your co-operation and support.

The information required below is passed on to your class representative for the purpose of compiling a ‘Class List’. This list is useful when contact needs to be made between parents for organising birthday parties, social activities etc. It is not to be used as a means of soliciting work, nor is the list to be passed on to anyone outside the school community.

CLASS 2014: ____________________________________________

CHILD’S NAME: ____________________________________________

MOTHER/GUARDIAN: ____________________________________________

FATHER/GUARDIAN: ____________________________________________

HOME TEL NO: ____________________________________________

MOBILE NUMBER/S: ____________________________________________

EMAIL ADDRESS: ____________________________________________

I GIVE PERMISSION FOR THE ABOVE INFORMATION TO BE INCLUDED ON THE CLASS LIST & DISTRIBUTED BY HARD COPY & EMAIL.

(If ‘NO’ only your child’s name will appear.) YES / NO

PLEASE RETURN THIS FORM BY WEDNESDAY 12 FEBRUARY.

SIGNED : ___________________________ DATE : ___________________________

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