

# SCHOOL DIRECTORY AUTHORIZATION

A school directory is being compiled for the 2011-2012 school year. Please return this form by Tuesday, September 6, 2011. **Only the families who return this authorization form will be included in the directory.** Parents are asked to give authorization to include the following personal information in the school directory:

Family Name  
Name of Parents  
Name of Students with Grades  
Name of other siblings  
Address  
Phone Number  
Email Address

Please check one of the following:

- Yes**, please include our family in the School Directory  
 **No**, please withhold our family from the School Directory

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Family Name: \_\_\_\_\_

Name of Parents: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Father Cell : \_\_\_\_\_ Father Email: \_\_\_\_\_

Mother Cell: \_\_\_\_\_ Mother Email: \_\_\_\_\_

Name of Students:

|       |             |
|-------|-------------|
| _____ | Grade _____ |
| _____ | Grade _____ |
| _____ | Grade _____ |
| _____ | Grade _____ |

Name of Additional Siblings (optional):

|       |           |
|-------|-----------|
| _____ | Age _____ |
| _____ | Age _____ |
| _____ | Age _____ |
| _____ | Age _____ |