

"You've Got Mail . . ."

Please complete this form and return to your child's teacher. We are happy to provide the method of communication that works best to you.

Child's Name: _____

Parent's Names: _____

Address, City, Zip: _____

Phone Numbers: _____

Home

Cell

Cell

Email Addresses: _____

(please print)

Check below which methods you prefer to receive school communication. You may receive more than one way.

Email

Website

Paper Copies

Facebook Page

Other: _____

Comments: _____
