

Mount Prospect Elementary School PTO

New Student Directory Form 2016-2017



Student's Name: (Last) _____ (First) _____ Grade _____

Student's Name: (Last) _____ (First) _____ Grade _____

Student's Name: (Last) _____ (First) _____ Grade _____

Student's Name: (Last) _____ (First) _____ Grade _____

PLEASE PRINT

Home Phone: _____ Primary Email: _____

Address: _____

Father's Name: _____

Address:(If different from above) _____

Cell Phone: _____ Email: _____

Mother's Name: _____

Address:(If different from above) _____

Cell Phone: _____ Email: _____

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According to state law the PTO MUST obtain your signature authorizing permission to include your information and child's name in the directory and class list. By signing this form, you hereby authorize the PTO to include the information and child(ren)'s name(s), as stated above, in the MPS directory in both print and online versions as well as the class list of the directory from this date forward, so long as your child is enrolled as a student at MPS. A new directory form must be completed if you wish to make changes or updates to the information provided above.

X _____ (Signature required) Date _____