

Fireside Elementary School Directory Information Form

DON'T BE LEFT OUT!! Please help us complete the Fireside informational directory. Be sure to fill out only that information you would like to appear in the directory, which is intended for internal use only. **PLEASE RETURN BY FRIDAY SEPT. 5th.**

SECTION 1: Student Information

Student's First and Last Name: _____

Grade: _____ Student's Teacher: _____

Student's First and Last Name: _____

Grade: _____ Student's Teacher: _____

- I was included in last year's Directory and my information remains correct. (Skip to Section 3.)
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SECTION 2: Guardian Information

Guardian #1 First and Last Name: _____

Mailing Address: _____
Street Address City State Zip

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

- OK to send Fireside information to this address.

Guardian #2 First and Last Name: _____

Mailing Address: _____
Street Address City State Zip

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

- OK to send Fireside information to this address.
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SECTION 3: Other

- I would like to purchase _____ copies of the Fireside Directory for \$5.00 each. (Please attach payment – make checks payable to Fireside PTO.)
- I give my permission for the above information to be included in the Fireside Directory for as long as my child is enrolled at this school. I will take responsibility for alerting the publishers of this directory of any necessary changes.
- In order to save paper and ink toner, I would like to receive the monthly newsletter, the Fireside Chat, **electronically only.**