



Master List Form

Please take a moment to fill out your family information on the form below. The information you put on this form will be placed on the class list that is distributed to families in your child's class.

Parent/Guardian Name(s):

Child Name:

Please indicate here if you would like us to use a nickname on the class list and in the classroom on labels and nametags: _____

Family Address:

Family Phone Number:

Would you like your e-mail address to be placed on the list? If yes, note it below (please use block letters):

Email Address:

Signature

Date