Due Sept.

Clyde Hill PTSA

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2008 Directory Form

The information you provide below is what will appear in the school directory. Please return completed form to the Office or send it to class with your child. Directories are free with PTSA membership or can be purchased.

Child's Last Name	Child's First Name (as it should appear in Directory)	Grade/Teacher
Child's Last Name	Child's First Name (as it should appear in Directory)	Grade/Teacher
Child's Last Name	Child's First Name (as it should appear in Directory)	Grade/Teacher

Please check the appropriate box:

- ❑ Use the same information as in last year's Clyde Hill Directory.
- ❑ Use the new information provided below.
- ❑ Do not list my child's information in the Directory [be sure to sign below].

Child's Residence—Street Address, City, State, Zip

( ) Child's Home Phone Number optional)

( ) Alternate Phone Number (with description, i.e. Mom Cell –

Email Address (please print VERY clearly! Take care with ones, L's, o,'s 0's)

Alternate Email Address (optional)

Residential Parent(s)/Guardian(s)

Last Name First Name

Last Name First Name

(If applicable) Non-Residential Parent(s)/Guardian(s) To be listed in Directory

Last Name First Name

Last Name First Name

Parent/Guardian Signature **Date**