

Contact Information 2015-2016

Student Name _____

Grade _____

Administrative Master Address, Phone and Email List

Please provide your mailing address, phone number, and email address where you would like to receive short notice announcements and schedule changes such as sports practice/games time change, and other such notices. Your information may be used by teachers to contact you to discuss a student's progress. *To protect your privacy, please provide only the information that you are willing to share.*

Student

Name and e-mail _____ / _____

Student's address _____

Student's home phone _____ cell# _____ Texts Y / N

Mother/Guardian

Name and e-mail _____ / _____

Mother's address _____

Mother's home phone _____ cell# _____ Texts Y / N

Father/Guardian

Name and e-mail _____ / _____

Father's address _____

Father's home phone _____ cell# _____ Texts Y / N

Host Family and phone (if dorm student) _____

PARENT/GUARDIAN SNOW DAY MESSAGE PHONE NUMBER _____

List only the number or numbers you wish called as early as 5:00 a.m. for school cancellations. Only parent/guardian phone numbers please.

Please initial:

_____ If requested, you may share our contact information with other RMLHS families.

_____ If requested, you may share our contact information with RMLHS organizations, such as the Booster Club or Mission Advancement Team.

Parent/Guardian Signature

Date