

The Rainbow Garden School Directory

Student's Name:

Class : 2yr 3yr 4 yr

Days per Week: M T W Th F

Parent's First & Last Name:

I would like to be in the school directory: _____

I would not like to be in the school directory: _____

If you would like to be in the school directory please print your phone number and mailing address on the lines below.

Home Phone Number: (_____)_____

Mailing Address:

Email Address: (Optional)_____

Parent's Signature:_____

Date: _____