

## DIRECTORY INFORMATION CONSENT FORM

I \_\_\_\_\_ give the Chilmark School permission to include:

- My child's name, address and phone number in a class list to be published for school use and made available to other parents in my child's class.
- I would like my child's name included, but maintain the address unlisted
- I would like the name included, but maintain the phone number unlisted
- I would like to be listed on the parent e-mail list

E-mail address

Parent 1: \_\_\_\_\_

Parent 2: \_\_\_\_\_

Student Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_