

P.T.O. POCKET DIRECTORY INFORMATION

If you would like to be included in the school directory, you must return this form to the office by Friday, September 23, 2011.

PLEASE PRINT NEATLY IF YOU WOULD LIKE YOUR INFORMATION TO BE CORRECT. Thanks!

Student's Name(s) _____ Grade Level _____
_____ Grade Level _____
_____ Grade Level _____
_____ Grade Level _____
_____ Grade Level _____
_____ Grade Level _____

Parent/Guardian Names _____

Address _____

Home Phone _____

Cell Phone #'s _____
Cell Phone # _____ Name _____
Cell Phone # _____ Name _____

E-Mail Address _____
E-Mail _____ Name _____
E-Mail _____ Name _____

I wish to have my name and the above information published in the school directory. I understand that this directory is provided for the use and convenience of St. Teresa of Avila parents, teachers, and staff ONLY. When you purchase your directory, please do not release any of the information for any other purpose. Thank you for your participation.

Signature: _____ Date: _____