CONTACT DETAILS 2015/2016

Please return this form even if you did so previously as we must update our records each year.

It is essential that we are able to contact Parents/Guardians whenever necessary. With this in mind, we would be grateful if you would take a few minutes to complete this form with all of your current details so that we can ensure that our files are accurate. We use webtext and email as a means of communication with parents. It is vital that we have your current contact details and that you notify the office in case of any changes.

BLOCK CAPITALS PLEASE

NAME OF STUDENT:	
FORM:	
PARENTS'/GUARDIANS' NAMES:	
HOME ADDRESS:	
SECOND ADDRESS (IF APPLICABLE):	

CONTACT NUMBERS:		
	MOTHER/GUARDIAN	**FATHER/GUARDIAN**
HOME:		
WORK:		
MOBILE:		
EMAIL: PLEASE PRINT		

CONTACT IN CASE OF AN EMERGENCY IF PARENTS / GUARDIANS CANNOT BE CONTACTED:	**NAME:**	
	RELATIONSHIP TO STUDENT:	
	HOME TELEPHONE:	
	MOBILE TELEPHONE:	
	WORK TELEPHONE:	

☐ **I give permission for my email and mobile phone number to be given to the Parent Teacher Association**