

KATONAH-LEWISBORO SCHOOL DISTRICT
2018-2019
(Please print legibly)

Student's Name:	18-19 Grade:	18-19 School:
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PTA/PTO STUDENT DIRECTORY
STUDENT INFORMATION OPT-OUT
(Optional)

Please read this form carefully, and return this form only if you do not want your child's information to appear in the 2018-19 Student Directory.

Each year, the school district provides to the Parent Teacher Associations and Organizations directory information for the students in their building. This information includes the student's name, home address and home telephone number.

Unless you opt-out on this form, your student's information will be included in the Directory. If you wish for your child's information to be included, there is no need to complete or return this form.

I wish to **opt-out** of displaying my child's information in the Student Directory: (Please check box and sign below)

Parent/Guardian signature: _____ Date: _____
(Return this form only if you do not want your child's information to appear in the Directory)