**Parent/Guardian contact information sheet**

**Please fill in the form below and have your son/daughter return it to Ms. Ashley as soon as possible.**

**If you prefer you can send it to me by Email-** **aashley@sd52.bc.ca**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Parent(s)/Guardian(s) Names and contact numbers***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Parent(s)/Guardian(s)** | **Home phone #** | **Work phone #** | **Cell phone #** | **Email address** |
|  |  |  |  |  |
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|  |  |  |  |  |
|  |  |  |  |  |

**Please verify, by signing below that you have seen the course outline that your son/daughter brought home. If you have any questions please feel free to contact me through email. Thank you.**

***Name of Parent/Guardian* *Signature***

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