School Directory Opt-Out Form

Student(s) Names & Grades: _____

Parent(s) Names: _____

Please sign, date, and return to the school office if you **DO NOT** wish to be in the
Valley Catholic School Directory.

Parent/Guardian Signature_____ Date_____

- ➢ **No Action is required if you would like to be in the school directory.**

- ➢ If you would like to be included in the directory, but do not want all of the following information published, please **cross off the items you DO NOT want published.**

    Parent(s) Names
    Student(s) Names and Grades
    E-mail Addresses: One per parent
    Home Phone Number
    Home Address

- ➢ We will use the information you provided on your re-enrollment/registration form.

- ➢ If you have updated information, please note below:

_____

_____

_____

_____

_____

Please Return to the School Office