



## J.B. Watkins Room Parent Communication

Parents, if you would like to be included in communication from your child's Room Parent about class activities, school events, and other opportunities, please complete this form and return it to your child's teacher by Monday, October 12<sup>th</sup>, 2015. ***(Please print neatly)***

Your name \_\_\_\_\_

Your child's name \_\_\_\_\_

Your email address \_\_\_\_\_  
*(or phone number if you do not use email)*

Your child's teacher \_\_\_\_\_

Have you selected to opt out of having photographs of your child taken at school?      Yes       No

☺ Thank you for your support of our wonderful teachers! ☺