



IRVINGTON
UNION FREE SCHOOL DISTRICT

Dows Lane Elementary School
Deborah Mariniello, Principal
Andrea Kantor, Assistant Principal

TEACHER: _____

CHILD'S NAME: _____

Permission to Release Class List Information

Many parents like to have the contact information for their child's classmates in order to arrange play dates, plan birthday celebrations, or ask questions regarding homework assignments, etc. We are happy to provide this for the students in your class **with your permission**. Please complete the form below and be sure to check the appropriate box, either **granting permission to be included**, or asking **not to be included**.

Please check one:

_____ **I hereby grant permission** for my child's name, address, and phone number to be included in a class directory. By granting permission, I will also automatically receive a copy of the student class directory.

Child's name: _____ Phone: _____

Address: _____

Parent signature: _____

_____ Please **do not** include my child's name, address, and phone number in the class directory.

Child's name: _____

Parent signature: _____

Please complete this and return to your child's teacher ASAP!

Thank you!