Chamblee Middle School 2008-2009 Directory Information Form

(please print)

Student Name _____ Grade Level _____
Last Name First Name Middle Initial

Parent/Guardian Name_____
Last Name First Name

Parent/Guardian Name_____
Last Name First Name

Home Address_____
Street Apt City Zip

Home Phone _____ Email _____

I approve above information including email address to be used for CMS student Directory_____
signature

And if you are not already on our email list, here is a chance to sign up now!

☐ YES, I would like to receive e-newsletters from PTSA

☐ Use email listed above

☐ Use alternate email _____

Please return your completed form to the CMS Main Office for delivery to the PTSA.
Thank-you