

*Woodbury Heights Elementary School  
Home and School Association  
Directory Information Sheet  
2011-2012*

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Parent(s)/Guardian(s) Names: (please provide information as you would like it to appear in the directory)

First \_\_\_\_\_ Last \_\_\_\_\_ Telephone \_\_\_\_\_  
Please provide only one phone # for the directory

First \_\_\_\_\_ Last \_\_\_\_\_

Address: \_\_\_\_\_

*Membership and Directory Permission Statement*

\_\_\_\_\_ **I DO** wish to be an HSA member and have enclosed my \$3.00 membership fee. Additionally, I give my permission for the above information to be included in the Woodbury Heights Elementary School Directory. I understand that inclusion in the directory is voluntary. Furthermore, I understand the directory is provided for the convenience and exclusive use of elementary school students and their families.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ **I DO NOT** wish to be a member of the HSA at this time, however, I DO give my permission for the above information to be included in the Woodbury Heights Elementary School Directory. I understand that inclusion in the directory is voluntary. Furthermore, I understand the directory is provided for the convenience and exclusive use of elementary school students and their families.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ **I DO NOT** wish to have my child's address and phone number listed in the school directory.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

**Please return this form in an envelope marked "Membership" by Friday, September 30th, 2011.** If you should have any questions, please contact Molly Burow at 856-251-0583