

## Steller Student Directory and Parent Contact Information

*Please complete the information below, as you'd like it listed in the Steller Student Directory, which will be printed and distributed to Steller families for school related purposes only.*

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Advisory Group:** \_\_\_\_\_

**Student Email Address:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Advisory Group:** \_\_\_\_\_

**Student Email Address:** \_\_\_\_\_

**Student Home Phone:** \_\_\_\_\_

**Student Address:** \_\_\_\_\_

**City/Zip:** \_\_\_\_\_

**Parent 1:** \_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Evening Phone:** \_\_\_\_\_

**Parent 1 Email:** \_\_\_\_\_

**Parent 2:** \_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Evening Phone:** \_\_\_\_\_

**Parent 2 Email:** \_\_\_\_\_

\_\_\_\_\_ *I give **permission** for the above information to be included in the Steller Student Directory and to be used by the Advisory Group students and parents to contact our family. I understand the Steller Directory may be distributed electronically in PDF format to Steller families only.*

\_\_\_\_\_ *I **do NOT** want the above information included in the Steller Student Directory, but it may be used by the Advisory Group, students and parents to contact our family.*

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Please **do NOT** complete this form if you **do NOT** want your child's information to be included in the Steller Student Directory and you **do NOT** want to be contacted by your child's Advisory Group.*