

Parent Content & Contact Form

Please fill out and return the form by Friday, October 25, 2019.

Student's Name: _____

Homeroom Teacher: _____

Grade: _____ Homeroom Number: _____

Parent/Guardian Name(s) 1. _____

2. _____

Home Phone: _____ Alt. Phone: _____

Address: _____

_____ Yes, I give consent for my child to participate in WWHS Gentlemen's Club.

_____ No, I do not give consent.

Parent/Guardian Signature

Date

Please feel free to contact me with any questions at Nyshea.Edwards@portsk12.com

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Address: _____

_____ Yes, I give consent for my child to participate in WWHS Powerful Pearls.

_____ No, I do not give consent.

Parent/Guardian Signature

Date

Please feel free to contact me with any questions at Nyshea.Edwards@portsk12.com