



Family Phone Book

If you would like your family's information in our phone book, please complete the following form. If you prefer to leave some information out of the book, do not complete that line.

Child's Name (use Nickname if you prefer) _____

Address _____

City _____ State ____ Zip Code _____

Parent/Guardian's Name(s) _____

Email Address (es) _____

Phone Number(s) _____

I understand that the above information will be included in the RAMPP Family Phone Book.

Signature _____

Date _____

If you do not want any of the information in the book, please sign the following statement:

I/We ***DO NOT*** want our child's name in the family phone book.

Child's Name _____ Parent/Guardian's Signature _____ Date _____