

**Walnut Ave School PTA  
PARENT INFORMATION FORM**

Please complete the following information and return it to one of the **CLASS PARENTS** listed below  
**AS SOON AS POSSIBLE**  
(place in envelope in backpack with class parent name on it)

Student Name:

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Address:

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Best Contact #s:

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Email Address:

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Name Parent #1:

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Name Parent #2:

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May we include the above information on a list to be distributed to all families in your child's class? \_\_\_\_\_ Yes      \_\_\_\_\_ No

\*\*\*Does your child have any allergies we should know about when planning class events?  
Please list

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**THANK YOU!!!** Your 2017-2018 Class Parents and Grade Parent

**Class Parent:** \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email:

\_\_\_\_\_

**Class Parent:** \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email:

\_\_\_\_\_

**Grade Parent:** \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email:

\_\_\_\_\_