Hola,	
Please complete this form, in case I need to contact you during the year.	
Gracias,	
Maestro David West	
Information Form	
Student Name (print legibly):	Period:
Responsible Adult 1 Name: (Please Print)	
Responsible Adult 1 email address:(Write legibly!)	
Daytime Contact Phone Number:	
Responsible Adult 2 Name: (Please Print)	
Responsible Adult 2 email address:(Write legibly!)	
Daytime Contact Phone Number:	

TURN THIS PAGE IN