Dear Class Parents:

The following parent(s) has volunteered to be the room parent for classroom this school year:

In order to contact you about classroom events and volunteer opportunities throughout the year, please complete the bottom portion of this letter and return to the teacher ASAP. Without this completed form, the room parent(s) is unable to communicate with you about upcoming class events.

If you have any questions, please contact:

Thank you!!!

Class Communication Form

Please complete the following information and return to your teacher. Please include the names of both parents/guardians if available to volunteer.

Student's Name _____

Parent/Guardian Name(s) _____

Student's Teacher _____

___ I am willing to donate food for class celebrations.
___ I am willing to volunteer at class celebrations/activities.
___ I do not want to receive any communication from the room parents.

You may contact me at:

E-mail:

Phone: ___ ___ ___ - ___ ___ ___ - ___ ___ ___ ___