

## CNS Directory Form

Every year, a directory is created and distributed among the families at CNS. If you would like your family's information to be included in the directory, please complete the information below. (Please print.) Please return to the office by Sept. 1<sup>st</sup>.

Student(s) Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip code: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

May we use this information for the alumni list?      **Yes** \_\_\_\_\_      **No** \_\_\_\_\_