

MEMORIAL MIDDLE SCHOOL FSA DIRECTORY 2018-2019

Dear MMS Families,

Please complete the following form if you have any updates or changes to make to the MMS FSA Directory for the following school year. By completing this form you are giving us permission to publish the family information you have provided.

Please complete this form in print & return to FSA Mailbox in the office,
or email to mmsfsadirectory@gmail.com
or complete online at: <http://tinyurl.com/MMSDirectory>

FAMILY NAME: _____

NAMES of child(ren) and GRADE LEVEL in SEPTEMBER 2018 (MMS ONLY)

Child's Name	Grade for September 2018



Telephone number: _____

Home address: _____

Mother's first name: _____

Email address: _____

(Please clearly write this information, especially 1, Ll, li, 0 zero, Oo)

Father's first name: _____

Email address: _____

(Please clearly write this information, especially 1, Ll, li, 0 zero, Oo)

PLEASE COMPLETE FORM BY June 9, 2018