

H.B Brunner School PTA Directory Form

| Emergency Contact Card | |
|--|--------------------|
| Student Last Name | Student First Name |
| Grade | Teacher |
| Home Address | |
| City | Zip Code |
| Parent/Guardian 1 Info | |
| Last Name | First Name |
| Cell Phone | Home Phone |
| Email | |
| <input type="checkbox"/> I am interested in volunteer opportunities at Brunner School throughout the year* | |
| Parent/Guardian 2 Info | |
| Last Name | First Name |
| Cell Phone | Home Phone |
| Email | |
| <input type="checkbox"/> I am interested in volunteer opportunities at Brunner School throughout the year* | |
| Please list 2 local friends, neighbors or relatives to whom your child can report to if you are not available | |
| Name | Home Phone |
| Relationship | Cell Phone |
| Name | Home Phone |
| Relationship | Cell Phone |

*There are volunteer opportunities that range from 1 hour to a full year commitment, please consider volunteering your time. The PTA will contact you with more information on how you can get involved. To receive the weekly Brunner Backpack with all school related news sign up here- <https://lp.constantcontactpages.com/su/mjxatcZ/BrunnerSchoolsignup>

The above contact information will be shared with your child's room parents as a class directory unless otherwise stated in writing to Monica Sandler, PTA 1st VP at monicasandler@gmail.com