

St. Stephen's Episcopal Preschool

**E-Mail Release Form**

Name \_\_\_\_\_

Child's Name/Classroom \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Please select all of the following options that you desire** regarding e-mail communications from the preschool office (director), teachers, parent representatives and classrooms parents that you desire.

Please note that beginning in October the director's monthly newsletter will be e-mailed.

Make my e-mail address available for communications from:

\_\_\_\_\_ the preschool office (director)

\_\_\_\_\_ my child's teacher(s)

\_\_\_\_\_ parent representatives

\_\_\_\_\_ parents in the preschool community

\_\_\_\_\_ I do not wish to receive any communications via e-mail from the director, preschool teachers, preschool parent representatives or preschool parents.

\*The use of the preschool parent e-mail addresses are for the use of preschool communication and business only\*