



2020-2021 FHC Directory Form

Please complete the form and return it to the FHC Office by **September 25th**

Student Last Name: _____ Student First Name: _____
Student Phone (if you would like this included): _____

Circle Grade for the 2020-2021 school year: 9 10 11 12

YOUR INFORMATION WILL BE INCLUDED IN THE DIRECTORY UNLESS YOU OPT OUT

Check this box if you DO NOT want your information included in the directory.

I would like to order a directory at the cost of \$4.00 each. Please return this form to the office with cash or check made out to FHC PTO by September 25th. Quantity Ordered _____

Fill out the below to make sure your information is accurate and up to date. Please print clearly.

Parent Name(s): _____

Parent Home Phone (if applicable): _____

Parent Cell Phone/Name: _____

Parent Cell Phone/Name: _____

Address: _____

City, Zip: _____

Email: _____

Second Residence (if applicable):

Parent Name(s): _____

Parent Home Phone (if applicable): _____

Parent Cell Phone/Name: _____

Parent Cell Phone/Name: _____

Address: _____

City, Zip: _____

Email: _____