

“Parentmail” information form

I am **able** / **not able** (please amend) to receive information and **give** / **do not give** permission for my e-mail address and mobile number to be registered with “Parentmail”

Parent Name/s...../.....

Children/s names..... Tutor Group.....

.....

.....

.....

My E-mail address/es.....

.....

Mobile Telephone Numbers

(Mother)...../(Father).....

Signature.....Date.....

Additional information can be added overleaf

Please return this form to

*Mr. J Crouch  
Robertsbridge Community College  
Knelle Road  
Robertsbridge  
East Sussex  
TN32 5EA*