Room Parent Class Communications Opt-out Form 2024-2025

Room Parents play an important role providing assistance to Teachers to help ensure students have the best experience possible at PAES while allowing teachers more time to focus on education. Our class Room Parents predominantly use email to communicate directly with parents for class celebrations, activities, and more!

The school will provide a school roster to the PTA Room Parent Coordinator with the student name, teacher, parent name(s), email addresses, and phone number of parent(s). **This information will ONLY be used for Room Parent communications related to your student's class.** The Class Room Parent will only receive contact information for their specific class. (Note: The PTA will not use this list for other communication or to solicit PTA membership, etc.)

If you **DO NOT want emails from the Teacher's Room Parent,** please fill out the information below.

By opting out of electronic communication you may not receive all information about class celebrations, activities, etc. This form **must be filled out for EACH STUDENT including the phone number and / or email address you wish to REMOVE from the list.** *This form will only remove you from the list used by the Room Parent for that class, and will not remove the contact information from the school student information system.*

The Opt-Out form **must be returned by** <u>Friday, September 13</u> in order to be removed from the Room Parent Communications list for the 2024-2025 school year.

_____ **YES:** I want to receive emails from my child's Room Parent! *(You DO NOT need to return this form.)*

_____ **NO:** I do not want to receive information related to my child's class from the class Room Parent electronically. I understand that I may not receive all information related to class activities by selecting this option. **Please complete information below and email to paepta@gmail.com**, or return to your child's teacher.

Student Name: _____ Teacher: _____

Parent Name(s): _____

Email Address(es) to Remove: _____

Parent Signature: _____ Date:_____