

*Westview PAC
641 17th Street West
North Vancouver, BC V7M 0A1*

CONTACT INFORMATION:

Teacher: _____ Grade: _____ Division: _____

Student Surname: _____ Student First Name: _____

Phone Number: _____

Parents/Guardians First Names (Usual Names) _____

Signature: _____

PARENT EMAIL NETWORK:

To keep parents well informed, **Westview Elementary** PAC will be establishing an email list to be used for PAC purposes only. Email messaging is an important way to keep up-to-date on school and PAC. Your email address will NOT be published but will be used to dispatch information through a PAC email fan-out structure within our school.

- YES _____ I would like to receive PAC email communication at the following email address (*please complete contact information*):

_____ @ _____ . _____

- NO _____ I do not want to receive PAC email communications.