School Name:- Middleton Technology School
Postcode:- M24 2GT

# PARENTMAIL DATA CAPTURE FORM

I give / do not give (please select) my permission for my email address and mobile number to be registered with ParentMail®.

**PLEASE COMPLETE IN BLOCK CAPITALS**

**Child's Details**

| | |
|---|---|
| First Name | |
| SURNAME | |
| Form/Class | |

| | |
|---|---|
| First Name | |
| SURNAME | |
| Form/Class | |

**Parent/Guardian Details**

| | |
|---|---|
| Salutation | First Name |
| SURNAME | |
| Email Address | |
| Mobile Number | |

| | | | |
|---|---|---|---|
| Relationship to Child | | Primary Contact (Tick) | |

| | |
|---|---|
| Salutation | First Name |
| SURNAME | |
| Email Address | |
| Mobile Number | |

| | | | |
|---|---|---|---|
| Relationship to Child | | Primary Contact (Tick) | |

**Additional Details (if required)**

| | |
|---|---|
| Child First Name | |
| Child SURNAME | |
| Form/Class | |

| | |
|---|---|
| Additional Email Address | |

Signature _____ Date _____