



# DIRECTORY Information and Order Form

Mother's Last Name \_\_\_\_\_ Mother's First Name \_\_\_\_\_

Father's Last Name \_\_\_\_\_ Father's First Name \_\_\_\_\_

Main Residence address \_\_\_\_\_

City (circle one) Frankfort Mokena New Lenox State IL Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_

Directories are \$7.00 each. 1=\$7.00 \_\_\_\_\_ 2=\$14.00 \_\_\_\_\_

Child #1  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

Child #2  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

Child #3  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

Child #4  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

Child #5  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

Child #6  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

By completing and submitting this form you agree to have your information published in the school directory. The FSP does not provide the personal information of students, parents or teachers to any entities, organizations or agencies for solicitation nor should anyone receiving the directory use the information within for such purposes.

**The directory form must be returned regardless of payment method.**

If purchasing online, you may access the Directory by clicking on the FSP link on the RevTrak Site. Please indicate student's last name and ID number-directory will be sent home with that student.

PAYMENT INFORMATION: Please do not send cash

CIRCLE ONE: CHECK Enclosed

ONLINE via REVTRACK

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Office Use Only

Paid Check # \_\_\_\_\_

Paid by RevTrack # \_\_\_\_\_