

## REQUEST FORM FOR UPDATING OF PARENT'S CONTACT NUMBER

Name of Pupil: \_\_\_\_\_

Iden-No: \_\_\_\_\_ Class: \_\_\_\_\_

In the event that the school needs to send an SMS to you, please provide your 1<sup>st</sup> choice and 2<sup>nd</sup> choice handphone numbers. **The SMS will always be sent to the 1<sup>st</sup> choice number** while the 2<sup>nd</sup> choice number will also be used when the SMS is of high importance.

	Handphone number	Name of parent / guardian	Relationship to student	Owns a Smartphone (mobile phone with internet access) (Please indicate Yes or No)
1 <sup>st</sup> choice number				
2 <sup>nd</sup> choice number				
Emergency contact				

### Declaration

I am aware that by signing this form, I am consenting to the school and its staff (including Form teachers, PE teachers, CCA teachers and other authorized school personnel) using the information contained herein for the purposes of (a) updating any student information databases managed by the school or the Ministry of Education, (b) planning and conducting the school's programmes and (c) making disclosure, where relevant and necessary, to government agencies, statutory boards, health-care providers, and other parties in order to ensure the safety and well-being of my child.

Parent's /Guardian's Name: \_\_\_\_\_

Parent's /Guardian's Contact: \_\_\_\_\_

Parent's /Guardian's Signature and date: \_\_\_\_\_