



*GOOD SHEPHERD CATHOLIC SCHOOL*  
**GRANDPARENTS/SPECIAL PERSON'S DAY**  
*On Friday, February 3, 2012*

Attendance Form:

Please complete this form for any Grandparent/Special Person that will be attending. **Special Person's are relatives or close family friends (at least 18 years of age and not parents).** Please list all of your guest information as the school will use this to create name tags:

Grandparent/Special Person's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Grandparent/Special Person's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Please list all of your children and the number of attendees for each of their respective classrooms (**even if the number is zero**). Example: 2 special people + 2 students = 1 special person/attendee per classroom. If they will be visiting multiple classrooms, please include them in the # of attendees for each classroom to plan for attendance.

Child's Name \_\_\_\_\_ Grade \_\_\_ # of Attendees \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_ # of Attendees \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_ # of Attendees \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_ # of Attendees \_\_\_\_\_

Please return this form by Monday, January 23, 2012 so that we can get a head count.

For any questions, please call Veronica Dessouky @ 858.546.8132 or e-mail [vdessouky@san.rr.com](mailto:vdessouky@san.rr.com)