

**\*\* Dear Parents, If you would like to 'Opt In' to the Class Representatives Program, please complete your contact details below and return to the office as soon as possible. Thank you**



**Williamstown North Primary School – 1409  
Class Representatives Program 'opt in' form**

Dear Parent/Guardian,

Williamstown North Primary School (WNPS) prides itself on constantly striving to provide our students with a learning experience that is of a high standard. The active involvement of parents in the life of a school helps promote a healthy, interactive and engaging learning environment for staff, parents/carers, and most importantly for students. With this in mind our Class Representatives Program aims to enhance communication and engagement between teachers and parents/carers, to more actively support learning in the home environment.

Each class has 1 or 2 Class Representatives who facilitate regular communication between teachers and parents.

When you 'opt in'\* to the Program, your Class Representative will add your details to the Class Contact List which is distributed to all the families in the class. Your Class Representative will also send you a fortnightly E-news which provides you with an overview of what is happening in your class, activities you can do at home to support your child's learning, and details of upcoming social get-togethers.

***If you require any further information on the Class Representatives Program, please contact our Program Co-ordinators, Julie Noonan and Toni Burton at [wnpsclassreps@gmail.com](mailto:wnpsclassreps@gmail.com)***

\*By opting in to the Program you agree that your contact details can be shared with other parents in your class. These contact details are used for the purposes of the Class Representatives Program only. Any issues outside of the Program need to be raised directly with the teacher or School Principal. Please note you are opting in to the Program for the time your child is a student at WNPS. If at any stage you wish to 'opt out' of the Program, please contact the school office at [williamstown.north.ps@edumail.vic.gov.au](mailto:williamstown.north.ps@edumail.vic.gov.au)

**Williamstown North Primary School  
Class Representatives Program 'opt in' form**

I consent to **'opt in'** to the Class Representatives Program at Williamstown North Primary School.

Parent Name/s: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/s Details: Mobile \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_