

THE PARENT ACADEMY

School Liaison Form

Name of School/Organization: _____

Regional Center: _____

Principal's Name: _____

School Liaison: _____ Title/Position: _____

Phone: _____ Fax: _____ E-Mail: _____

*Please fax this form to The Parent Academy office: 305-523-0505 as soon as possible
For more information, please call 305-995-2680.*

