

Contact Sharing Consent Form



Deutsche Schule Nairobi
German School Nairobi

Date: _____

I hereby give my consent to the German School Nairobi to share my contact details with other parents of students in my child's/children's class(es). This information will be used to stay informed about developments related to parent representative discussions.

I may contact the school at any time to update or change my preferences listed below.

Name/s of Child/ Children: _____

Guardian 1

Guardian 2

Share

Share

(WhatsApp) Number

(WhatsApp) Number

Share
Email Address

Share
Email Address

Signature

Signature

**at least one Guardian should sign*