



WatchDOGS Registration Form for



Twin City Elementary

Name: _____

Email: _____

Address: _____ City: _____

Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Student's Name(s) and Homeroom Teacher(s):

_____	_____
_____	_____
_____	_____

(Signature)

(Date)

Please return this form to one of the following locations:

1. Email to **Joan Andrews, School Coordinator at jandrews@stanwood.wednet.edu**
2. Fax to **360-629-1279**
3. Mail to **26211 72nd Ave. NW Stanwood, WA 98292**
4. Drop the form off at the office or with your student's teacher.
5. If you have questions, please contact **Joan Andrews or Jennifer Allen at 360-629-1270**