



Litchfield Montessori School

5 Knife Shop Road
Northfield, CT 06778

2024-2025 Grandparent Form

Student Information

Student's Full Name: _____

Grandparents Day is May 9th

To ensure your child's grandparents receive an invitation to Grandparents Day, please use the form below to complete their information.

Maternal/Parent 1 Grandparent Information:

Grandmother		Grandfather	
First Name:		First Name:	
Last Name:		Last Name:	
Home Address:		Home Address (if different):	
Home Phone:		Home Phone:	
Cell Phone:		Cell Phone:	
E-Mail Address:		E-Mail Address:	

Paternal/Parent 2 Grandparent Information:

Grandmother		Grandfather	
First Name:		First Name:	
Last Name:		Last Name:	
Home Address:		Home Address (if different):	
Home Phone:		Home Phone:	
Cell Phone:		Cell Phone:	
E-Mail Address:		E-Mail Address:	

Grandparents love to be in the know and hear about what their grandchild(ren) is/are doing in school.

Invitations will be sent via mail and/or email depending on the event.

They will receive information regarding the Fall Festival, Season of Lights and/or CH Winter Gathering, Annual Wine & Beer Gala, Grandparents Day, and School Play. Grandparents will also have our annual publication *The Seed* mailed to their address.

To "opt" your parents "in" to receiving our weekly update, please check the box to the right.

Parent Initial: _____

If your parents are involved in your child's daily life, and you would like to have them added to your child's *Remind* Class, please check the box to the right.

Parent Initial: _____