

# Opt-Out of Automated Calling

Please complete this form to submit an official request to have a phone number removed from our automated call list. This signed form must be returned to the school.

**First Name**\_\_\_\_\_

**Last Name**\_\_\_\_\_

**Phone Number:**(XXX)-XXX-XXXX\_\_\_\_\_

Opt-out Type: (circle all that apply)

- ✓ Opt-out of non-emergency calls
- ✓ Remove number from system
- ✓ Other (please provide callback number)

**Callback Phone Number:**(XXX)-XXX-XXXX\_\_\_\_\_

I affirm that I am the owner of the above specified phone number and that I no longer wish to receive automated phone calls from the Cosmopolis School District at this number.

**Parent's Signature:** \_\_\_\_\_

Date: \_\_\_\_\_