



WatchDOGS

Registration Form



West Jefferson Middle School

Name: _____

Email: _____

Address: _____ City: _____

Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Student's Name(s):

Teacher(s):

(Signature)

(Date)

If you have questions, please contact F. Paul Figlia at: fpaulwatchdog@gmail.com