

I understand that my child may be photographed / videotaped at school. The photos may be posted on the district/classroom website. I give permission for these to be used in the classroom and for projects that will be sent home.

I give permission for my child's name, address and phone number to be included on a class phone and address list that will be distributed to students in room 7 and 8.

Child's name _____ Phone # _____ cell _____

Address _____

Parents/Guardian's Names (print please) _____

Email _____

Signature _____