

ST. JOSEPH MONTESSORI SCHOOL

COMBINED PERMISSIONS FORM

Please complete both sides of form.

The following permission items are required for all students. Please list your children's name(s):

Child 1: _____ Child 3: _____

Child 2: _____ Child 4: _____

1. PERMISSION FOR LISTING IN SCHOOL DIRECTORY

Each year SJMS publishes a school directory which includes contact information for the board, Family Association, staff, and individual families. This directory is furnished only to SJMS board, staff, and families.

_____ YES, include us in the 2009-2010 SJMS School Directory

_____ NO, do not include us in the school directory

Please provide the following information for office use, even if you choose not to be in the directory.

_____ Our information hasn't changed since last year. Thanks for not making us fill this out again!

#1 Parent(s) _____ #2 Parent(s), if different _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Phone _____ Phone _____

Email _____ Email _____

If parents live at different addresses, please circle where the child(ren) resides. #1 #2 Both

Please circle which parent should receive the monthly walk-home packet: #1 #2 Both

2. PERMISSION TO USE GRANDPARENT and FAMILY FRIENDS INFORMATION

Grandparents and special family friends are encouraged to participate in your child's life at SJMS. We will send invitations to school events and information about opportunities to support SJMS to anyone you indicate below.

Grandparent(s) _____ Grandparent(s) _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Friend(s) _____ Friend(s) _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

_____ Please only send invitations to special events like Grandparents Day

_____ Please only send information about giving opportunities like the annual fund.

COMBINED PERMISSIONS FORM (Cont.)

3. PERMISSION TO USE DATA FROM THE FAMILY and EMERGENCY MEDICAL FORMS

The Board of Trustees and the Development Committee are interested in compiling statistics/data about SJMS families for recruitment and other purposes, and in seeking assistance of individuals with specific skills/talents. This information can be gathered from the Family and Emergency Information forms. We will assume permission to use this information for internal school purposes only unless you indicate your refusal below.

_____ NO, I/we do not give permission to use our information.

4. PERMISSION TO USE PHOTOGRAPHS (for all students)

SJMS staff and volunteers may take photographs of students engaged in Montessori-related and other school activities. These photographs, whole, in part, or composite, may be used as the school sees fit ONLY in the publication of educational materials, brochures, the SJMS website, advertising, and/or other public relation purposes. All photographs become the exclusive property of SJMS, which shall, at its sole discretion, determine the copy to be used in conjunction with the photograph for the purposes stated above. All images will be used in a manner that reflects the spirit of SJMS and conveys the educational experience of students.

_____ YES, I/we give permission for our child(ren) to appear in photographic materials used by SJMS.

_____ NO, I/we do not give permission.

5. CLASS WALKING TRIP PERMISSION (for Children's House students only)

_____ YES, I/we give permission for our child(ren) to take supervised neighborhood walking trips.

_____ NO, I/we do not give permission.

6. CLASS TRIP TRANSPORTATION PERMISSION (for Elementary students only)

_____ YES, I/we give permission for our child(ren) in Elementary to take supervised neighborhood walking trips, to ride in private cars, vans, etc., as well as in public transportation for field trips and shopping trips within Franklin County, and sponsored by SJMS.

_____ NO, I/we do not give permission.

VOLUNTARY INFORMATION: We'd appreciate it if you would provide the following information.

Weekly neighborhood paper (Clintonville Booster, This Week, etc): _____

Family religious affiliation: _____

My/Our signature(s) below signify consent to all permissions as they are specifically marked above:

Parent: _____ **Date:** _____

Parent: _____ **Date:** _____