

SACRED HEART ACADEMY 2017-2018 AUTHORIZATION FORM

Please fill in the appropriate information and check the appropriate boxes. Print, then sign both sides of the form and have your child return it to their building secretary by Thursday, August 31, 2017.

Sacred Heart Academy School/Parish will not photograph, videotape and/or voice tape individuals in its programs without consent. This form allows you to give permission for your child/children to be photographed, videotaped and/or voice taped by school personnel and/or area news reporters. Photographs, videotapes and/or voice tapes, when consented to, will only be used for the promotion of Sacred Heart Academy School/Parish Programs, including the school website and school-sponsored social media accounts.

(Please check appropriate)

- I, _____, hereby give permission for the personnel of *Sacred Heart Academy School/Parish* to photograph, videotape and/or voice tape my child/children (or allow area news reporters to do the same).
- I _____, hereby **DO NOT** give permission for the personnel of *Sacred Heart Academy School/Parish* to photograph, videotape and/or voice tape my child/children (or allow area news reporters to do the same).

This consent must be re-examined and signed each year.

Student Name(s): _____

MEDICAL TREATMENT AUTHORIZATION (please check box)

- As a parent/guardian, I do hereby authorize the treatment by a qualified and licensed physician of any condition, which, in the opinion of the physician, is deemed necessary and appropriate. This authority is granted only after a reasonable effort has been made to reach me.

TECHNOLOGY ACCEPTABLE USE POLICY: (please check box)

The SHA Acceptable Use Policy for Technology is found on pages 46-47 in the 2017-18 SHA Student-Parent Handbook available on RenWeb under Resource Documents and under Forms on our website at <http://academy.sha.net/editoruploads/files/Forms/Acceptable Use Policy for Sacred Heart Academy Technology Systems-2017-18.pdf>. Note: this form must be completed prior to any student having access to their Chromebook and/or iPad use at the elementary.

- I have read and agree to the SHA Acceptable Use Policy for Technology.

HANDBOOK VERIFICATION: (please check box)

The 2017-18 SHA Student-Parent Handbook is available on the website at <http://academy.sha.net/editoruploads/files/Student%20Parent%20Handbook/2017-18 Student Parent Handbook for web.pdf> and in RenWeb under Resource Documents.

- The 2017-18 handbook has been made available to me. I understand and agree to abide by the SHA handbook.

Parent Printed Name

Parent Signature

Date



**SHA Field Trip Form
2017-18 School Year**

Dear Sacred Heart Academy Parents/Guardians:

During the school year we will be taking various field trips during regular class time that go along with areas of study in our classrooms. Our school requires your written permission for your child to attend field trips. Unless otherwise notified, your child will be transported by school vehicle to and from the destination. On occasion, your child may walk to and from the destination if it is within walking distance of Sacred Heart Academy.

Rather than sending home a permission slip for each separate trip, I am sending this one form to cover all field trips throughout the year. Prior to each trip, we will post on RenWeb and/or email the parents of the students participating when, where and the method of transportation for each trip. If you prefer that your child not attend a particular field trip, please let your child’s teacher know prior to the day of the trip.

Please sign and return this form so your child will be able to participate in all field trips. If you have questions, please contact me at myonker@sha.net or 989-772-1457.

Sincerely,

Mrs. Mary Kay Yonker
Principal

I hereby request that _____ attend all SHA field trips for the 2017-18 school year. I understand that I will be notified prior to each individual field trip as outlined above. I will notify the classroom teacher if my child will not be going on a particular field trip.

Parent Printed Name

Parent Signature

Date