

Parental Permission

[Name of School]
 [Address of School]
 [Contact Numbers of School]

Parental Permission for course number _____ –Yearbook Course

Dates course runs _____

Student Name: _____

Parent/Guardian Name: _____

Phone Number(s): Home _____

Business _____

Cell _____

Health Card Number: _____

Family Doctor: _____

Doctor's Phone Number: _____

Dear Parent(s) or Guardian(s):

Your son/daughter has enrolled in the yearbook course for the 20____-20____ school year (September ____, 20____ to June ____, 20____ inclusive). In order to meet the course requirements and achieve the best possible benefit from this course, your son/daughter may be required to leave the school property during class time. Out-of class activities may include: soliciting advertisements, delivering receipts, buying supplies, or attending an athletic activity to obtain photographs. Students not achieving an acceptable level of conduct or behaviour may be excluded from the out-of classroom program.

The _____ [name your board of education] does not provide any accidental death, disability, dismemberment, or medical expenses insurance on behalf of students participating in these activities.

Insurance

When a parent or senior student volunteers to provide transportation to a yearbook activity, the [name your board of education] does provide coverage in excess of the liability insurance held by the volunteer. (This does not and cannot cover the collision portion of the volunteer's insurance coverage.)

Acknowledgment

We have read the above information and give permission for our son/daughter to participate in the out-of-class activities in year-book class.

Student Name: _____ Home Room: _____

Date: _____

Signature of Parent/Guardian _____

Students wishing to participate in the out-of-classroom program must have this form signed and returned to

_____ by _____ 20 _____

This form will be kept on file at the school for the entire year.