

Family Signature Page (**ONE PER FAMILY**)

Please print Family Name _____

I have read the 2020/2021 SJPII Family Handbook and agree to follow the school policies and procedures as stated. **Parents at all grade levels AND students in Grades 2-8 are required to sign.**

Parent signature Date

Parent signature Date

Student signature Date

Student signature Date

Student signature Date

Student signature Date

Student signature Date

PLEASE RETURN SIGNED FORMS BY FRIDAY, October 30, 2020.

CATHOLIC SCHOOL

Media Permission Form (ONE PER STUDENT)

Local Media

Local media frequently want to interview students to add a personal touch to stories. Students' comments may be used in newspapers, publications, web-based outlets, or broadcast on radio or TV. The school system monitors these presentations to ensure that they may reflect positively on the children involved. You will be informed if your child is interviewed by the media. This form allows you as a parent or guardian to choose whether your child may be interviewed. CHECK ONE I give permission to the news media to interview my child. Further, I authorize its use without inspecting or approving the finished product or its specific use. I do not give permission for my child to be interviewed by the news media.

Parent/Guardian Signature _____

Date _____

School Social Media

I understand that my child's photograph may be published on the SJPII website, social media accounts for Saint John Paul II Catholic School.
PLEASE CHECK ONE

_____ I give my permission for my child's photo on SJPII social media

_____ I do not give permission to put my child's photo on SJPII social media

Parent/Guardian Signature _____

Date _____

Distance Learning

I understand that my child may be seen or heard during distance learning activities at Saint John Paul II Catholic School.
PLEASE CHECK ONE

_____ I give my permission for my child to participate in distance learning sessions

_____ I do not give permission for my child to participate in distance learning sessions

Parent/Guardian Signature _____

Date _____

Student's Name _____

Student's Teacher _____

Student's Grade _____