

**St. Andrew's Christian Formation
Student Pick Up Permission
2018-19
(Please return this form at the first class)**

To be completed by parent/guardian:

Please complete the following permission form for our records and return it to your child's Christian Formation teacher as soon as possible. You only need to fill out one form if you have more than one child in the program. Also, please review the following dismissal procedure with your child prior to class.

Students in grades K-3 are to be picked up *by their parent* (or assigned guardian listed below) *at their classroom door* at 11:15 AM. Students in grades 4-8 will be dismissed by their teacher *at the front door* at 11:15 AM.

TO BE COMPLETED FOR ALL STUDENTS

<u>Child's name</u>	<u>Grade</u>
_____	_____
_____	_____
_____	_____

Names of those with permission to pick up child from Christian Formation _____

Who **does not** have permission to pick up child _____

Where will you be during 10:15 – 11:15 AM (ie. Adult education, Nursery, Social Hall, etc.)

Emergency phone number _____
(cell phone number, or name and number of a relative who can assume care of your child in the event of an emergency.)

Please list any medical concerns for your child that you think our Christian Formation staff should be aware of:

Parent/Guardian signature _____
Date _____

PLEASE FILL OUT BOTH SIDES OF THE FORM – THANK YOU!

**STUDENT PRESS RELEASE WAIVER
2018-19**

St. Andrew's Church and the Office of Christian Formation may produce or participate in videotape, audio recording, or still photograph productions that may involve the use of students' names, likenesses, or voices. Such production may be used for educational and/or community life purposes by St. Andrew's and the Office of Christian Formation and may be copyrighted, edited, and distributed by the Office of Christian Formation or St. Andrew's Church.

Please list all children currently enrolled in St. Andrew's Christian Formation program. This waiver will be honored as long as students are enrolled in this year's program, unless parents request otherwise. Please contact the Office of Christian Formation with any questions.

Child's name	Grade

_____ St. Andrew's Church and the Office of Christian Formation **have my permission** to have this/these student/students participate in the activities listed above.

_____ I object to the use of the above student's/students name, likeness, or voice in the manner described above. St. Andrew's Church and the Office of Christian Formation **do not have my permission** to have this/these student/students participate in these activities.

Date _____

Parent or Guardian signature