

**Parent/Student Acknowledgment Form 2019-2020**

Parent/Guardian printed name: \_\_\_\_\_

Parent/Guardian 2 printed name (optional): \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade level: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade level: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade level: \_\_\_\_\_

**Parent-Student Handbook**

Please carefully read the All Saints Catholic School Student Handbook. The handbook can be found on the school website (<http://allsaintsric.org/forms.htm> ).

*I/We have read, understood, and agree to adhere to the expectations, guidelines, and policies as stated in this All Saints Catholic School Parent/Student handbook discussed it with my child/children. I/We agree to abide by its policies understand that non-compliance can be grounds for disciplinary action up to and including removal from All Saints Catholic School.*

Parent/Guardian 1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian 2 Signature (optional): \_\_\_\_\_ Date: \_\_\_\_\_

Middle School Student Signature (grades 6-8 only): \_\_\_\_\_

Middle School Student Signature (grades 6-8 only): \_\_\_\_\_

**Media Release**

My signature below indicates that I hereby give permission to allow publication in print or electronically my child's creative efforts including stories and artwork, my child's image without his or her name and my child's name without his or her image. I grant All Saints permission to use photo/video likenesses of my child without his/her name. I understand the following vehicles may be used to disseminate the information: school website, the school's social media channels, other admissions/marketing materials, mass media coverage, and conference presentations. By giving permission to the school to use photographs of your student, you are also giving permission for those pictures to be used on all Diocesan digital media sites and the Catholic Virginian. In addition, if photos are used in The Catholic Virginian your child's first and last name may be used.

Parent/Guardian 1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian 2 Signature (optional): \_\_\_\_\_ Date: \_\_\_\_\_

**Parent Directory**

I hereby give my permission for my name, address, phone number and email address to be published in a School Parent Directory.

YES \_\_\_\_\_ NO \_\_\_\_\_ Initial \_\_\_\_\_ Date \_\_\_\_\_