



# St. Paul's School

6735 Fayette Street, Haymarket, Virginia 20169

## PERMISSION AND RELEASE 2012-2013 SCHOOL YEAR

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

\_\_\_\_\_ I give permission for my child to participate in walking field trips throughout the school year in the local area, not to exceed more than 100 yards from the school.

\_\_\_\_\_ I give permission for my child to be photographed or videotaped in school events. I give permission for these to be used for legal purposes **outside of school** such as on posters, in newspaper articles, advertising and/or on the website, as long as no personal information related to the child is disclosed.

\_\_\_\_\_ I give permission for my child to be photographed, videotaped, and identified in school events and publications, such as the school newsletter and bulletin boards, that are used **within the school** community and not distributed outside of St. Paul's School.

\_\_\_\_\_ I give school staff permission to assist my child with change of clothes, should they become soiled or if there is a potty accident. I agree to keep a spare change of clothes onsite at the school at all times and will keep them updated in size and season upon request of the school.

\_\_\_\_\_ I give permission for my family's email address to be listed in the school's email database. I understand it will be used for all school correspondence, bulk, and individual messages, announcements, etc. It will not be sold or distributed to anyone outside of St. Paul's School.

\_\_\_\_\_ I give permission for my family's phone number(s) and street address to be printed in the school directory. This directory will not be distributed outside of St. Paul's School.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Release