**St. Paul Christian Day School**

**Information Release Form**

**I give \_\_\_\_\_ I DO NOT give\_\_\_\_\_**

**permission for my child to have their name, phone number, and Email address posted on the class list that is available to room parents.**

**I give\_\_\_\_\_ I DO NOT give\_\_\_\_\_**

**permission for my child’s picture to be taken and utilized by the school for class projects and art work that will only be displayed at the school.**

**I give\_\_\_\_\_ I DO NOT give\_\_\_\_\_**

**permission for my child’s picture to be taken and shared with other parents in my child’s classroom through the classroom management app, text messaging, and/or email.**

**I give\_\_\_\_\_ I DO NOT give\_\_\_\_\_**

**permission for my child’s picture to be taken and utilized by the school for newsletters, school and church websites, and any other social media utilized by the school and/or church. Names will not be posted with pictures that are placed on the website or other social media.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child’s printed name**

**­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s printed name**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

**PLEASE COMPLETE THIS FORM AND RETURN IT TO THE OFFICE AT ST. PAUL CDS**

**THANK YOU**