

# Safety Harbor Montessori Academy

## General Release Form



Please check all that apply.

### **Family Directory Release:**

I give permission for the following information to be included in the SHMA Family Directory. I understand that the Family Directory will not be used for business purposes.

- Student/ Parent name(s)  
 Home address  
 Home telephone  
 Cell phone ( Please circle: Mom - Dad - Other \_\_\_\_\_ )  
 Email address ( Please circle: Mom - Dad - Other \_\_\_\_\_ )  
-OR-  
 Please omit all contact information

### **Photography Release:**

I give permission for SHMA to use any pictures or videos of my child taken at school in various publications, including but not limited to brochures, news media coverage or the school website.

- Yes  No (this does not include the yearbook photo.)

### **Media Center Release:**

My child has permission to borrow and use materials in the media center. I agree to see to the return of all materials borrowed. In the event of lost materials, I agree to pay the purchase price of replaced materials.

- Yes  No, my child does not have permission.

### **Internet Release:**

I understand and agree to inform my child of appropriate and safe internet use while on campus. My child is aware that SHMA's internet is for research and educational purposes only and social networking, including but not limited to My Space, Facebook and Instant Messenger, is not permitted. My child agrees to avoid accessing inappropriate material to the best of his/her ability and will immediately tell a teacher should such material surface.

- Yes  No, my child does not understand or does not agree.

### **Front Office Release:**

All front office information will be delivered via email. I am responsible for providing a current email and/or checking the school home page for announcements and updates.

Current email address(es): \_\_\_\_\_

### **Business Office Release:**

I prefer to have all financial information delivered via email:

- Yes\*  No, I prefer all information delivered via USPS.

\*Authorized email address(es): \_\_\_\_\_

**My signature authorizes that I have read and indicated all preferences related to the access and release of school and account information based on the guidelines above.**

**Authorized signature:** \_\_\_\_\_ **School Year:** \_\_\_\_\_

**Child's name:** \_\_\_\_\_ **Classroom:** \_\_\_\_\_

Please submit any change in preferences in writing to the Front Desk or Business Office.