



FROST ROAD ELEMENTARY SCHOOL

8606 162nd St, Surrey, BC V4N 1B4 • Tel: (604) 572-4050 • Fax: (604) 572-7569

Parents, **check off** the appropriate consent boxes below and sign this form **after reviewing all the attached materials**. If you have any questions or need further clarification, please contact us at the school. Please return to the classroom teacher by Thank you!

Media Coverage:

I consent for my child to be involved in media coverage.

I **DO NOT** wish my child to be involved in media coverage.

Name/Photo Publication

I consent for my child's **first** name and/or likeness to be published online including the district/school website, Twitter, Tumblr, Youtube and other social media sites used by school staff.

I **DO NOT** wish my child's name and/or likeness to be published online. This includes participation in special events, team rosters, accomplishments, congratulatory messages, etc.

Internet-Based Tools Access:

I consent for my child to access Internet-Based Tools at school I understand that the information my child may create and store could be stored in or access from a location outside of Canada, and I hereby consent, on behalf of me and my child, to my child's information identified below being stored in, or access from, a location outside of Canada. I agree that any violation of the technology access and use guidelines will result in appropriate consequences.

I **DO NOT** wish for my child to access Internet-Based Tools at school.

Home For Lunch

I give permission for my son/daughter to leave the Frost Road Elementary school grounds to come home for lunch.

Student Information Form

I have reviewed the Student Information Form and signed it.

Parent/Guardian Name: _____ Parent's Signature: _____

Daytime Contact Number: _____

Student's Name: _____ Division: _____