

BACK TO SCHOOL FORM 2018-19

Student Name _____ **Grade** _____

Cell Number _____ **Email** _____

Student Name _____ **Grade** _____

Cell Number _____ **Email** _____

Student Name _____ **Grade** _____

Cell Number _____ **Email** _____

Student Name _____ **Grade** _____

Cell Number _____ **Email** _____

Student Name _____ **Grade** _____

Cell Number _____ **Email** _____

Address _____ **City** _____ **Zip** _____

Home Phone Number _____

Father _____ **Cell Number** _____ **Email** _____

Mother _____ **Cell Number** _____ **Email** _____

Other _____ **Cell Number** _____ **Email** _____

I have received the following items electronically and accept the terms of the documents:

_____ **Student/Parent Handbook 2018-19**

_____ **Acceptable use of computer and Networks – Student**

_____ **Acceptable use of computer and networks – Parent**

_____ **Parent and Athlete Education Facts Regarding Concussions 2018-19**

Yes - No Parental Authorization and Release to display student work

Yes - No Authorizing Electronic notification

Parent Signature _____ **Date** _____

Student Signature _____ **Grade** _____

Student Signature _____ **Grade** _____

Student Signature _____ **Grade** _____

Student Signature _____ **Grade** _____

Student Signature _____ **Grade** _____