

North Border – Walhalla Permission Slip

Please sign your name, date, and initial each section indicating your permissions.

Student Name _____ Grade _____

Parent Signature _____ Date _____

Media Release

_____ I give permission for my child's name or photograph to be used for school related public media. This may include, but is not limited to, photographs or video for newspaper, newsletter, television, school events, and the school website.

Student Handbook

_____ I have access to the student handbook on the school website or have received a paper copy. I read and agree to the North Border School District policies and guidelines as written in the handbook.

Acceptable Use

_____ I grant permission for my child to access the Internet and / or use the school email network. I have read and agree to the North Border School District Acceptable Use Policy which is available in print from the office. I understand that some material on the Internet may be objectionable and I agree to accept responsibility for guiding my child and conveying to him/her appropriate standards for selecting, sharing, and/or exploring information and media.