



## PERMISSION SLIPS

### STUDENT INFORMATION

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

### SCHOOL SPONSORED EVENTS OFF SCHOOL PROPERTY

Yes  No I give permission for my child to take part in all school activities, including school sponsored trips away from the school's premises. I absolve Oceanview Christian Academy and Centreville Baptist Church from liability to me or my child because of any injury to my child at school or during any school activity.

#### Parental Signature(s):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date

### PUBLISHING PHOTOS

Yes  No I give permission for my child's photo to be published in print media.

Yes  No I give permission for my child's photo to be published on the school website and/or Facebook page.

Yes  No I give permission for my child to be published in video media.

#### Parental Signature(s):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date