

2016 - 2017 PARENT AND STUDENT AGREEMENTS

Please print the following required signature documents. One form must be completed by/for <u>each student</u> in your family and returned to his/her homeroom teacher.

- 1) Parent/Student Handbook Agreement; Media Release Form; Technological Policies Acknowledgement Form
- 2) Diocesan Universal Field Trip Permission Slip

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Name (please print)	IIN



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One form must be completed by/for each student.

PARENT/STUDENT HANDBOOK AGREEMENT

Please read the <u>St. Anne Catholic School Parent / St</u> teacher.	tudent Handbook, sign the form below and return to your homeroom	
My signature below asserts that I have read and agree to be governed by the rules, regulations, and policies in the <u>St. Anne</u> <u>Catholic School Parent / Student Handbook and any published addendum</u> .		
Student Signature	Parent Signature	
Me	DIA RELEASE FORM	
	tudents and their talents in press releases and written articles, printed oductions (for internal or public viewing), radio and/or television	
	n my child's photograph and to use it as appropriate in printed publications. age, video, and/or voice recording to be use for educational or promotional	
I understand that a photograph of my child appearing on	n the St. Anne website or the Internet will not identify my child by name.	
Student Signature	Parent Signature	
TECHNOLOGICAL PO	DLICIES ACKNOWLEDGEMENT FORM	
contents of the following St. Anne Catholic School J	ement Form, I confirm that I have read, reviewed, and understand the policies: Internet and Classroom Computer Acceptable Use Policy, d Personal Electronic Device Policy for Students, which are found	
and Chromebook Responsible Use Policy, and the Pers resources for appropriate purposes only. I understand use of devices, other technologies and my behavior questionable behaviors or actions will be judged by scho	of the Internet and Classroom Computer Acceptable Use Agreement, iPad onal Electronic Device Policy for Students, and I will use technological that these policies are meant to provide guidance for responsible, ethical but are not an exhaustive list of possible violations. I also understand that ol administrators using the intent of the St. Anne Parent-Student Handbook on, I am subject to consequences of the school and state and federal law.	
Student Signature	Parent Signature	

UNIVERSAL FIELD TRIP AND/OR YOUTH ACTIVITY RELEASE FORM

Assumption of Risk, Hold Harmless and Indemnity Agreement

Name of Youth:		
Parish/School: St. Anne Catholic School, 375 N	N.11th Street, Beaumont, Texas 77702	
I/We, the parent(s)/guardian(s) ofrequest that the activity/trip: Universal Field Trip form for sc	e School and/or Parish allow my/our son and/or daughter to participate in the following	
FOLLOWS:	NAL INSTRUCTION MY/OUR CHILDWILL RECEIVE I/WE PROMISE AS HARMLESS THE ABOVE NAMED PARISH/SCHOOL,	
ANY AND ALL OF ITS EMPLOYEES FROM AI SON/DAUGHTER AS A RESULT OF THIS TRI I/WE HAVE BEEN APPRISED OF THE MODE I/WE UNDERSTAND AND ACCEPT THAT MODE I/WE UNDERSTAND AND ACCEPT THAT MODE I/WE RELEASE, DISCHARGE AND DIOCESE OF BEAUMONT, AND MOST REVER FOR ANY AND ALL CLAIMS AND LIABILITY THOSE ENTITIES OR ANY OTHER USER OF UNDERSIGNED INJURY, DEATH OR PROPEI PARISH/SCHOOL, DIOCESE OF BEAUMONT DIOCESE OF BEAUMONT, HARMLESS AND MOST REVEREND CURTIS J. GUILLORY, BISEXPENSES THEY MAY INCUR BY PARTICIPATION INTO THE INHERENT DANGER IS UNDERSTOOD I/WE AUTHORIZE THE ABOVE NAMED PAR AND ALL ORGANIZERS OR SPONSORS TO INTO HEALTH OR SAFETY OF THE ORGANIZION ALL ORGANIZERS OR SPONSORS TO HE HEALTH OR SAFETY OF THE ORGANIZION ALL ORGANIZERS OR SPONSORS TO AND ALL ORGANIZERS OR SPONSORS TO	COVENANT NOT TO SUE THE ABOVE NAMED PARISH/SCHOOL, EREND CURTIS J. GUILLORY, BISHOP OF DIOCESE OF BEAUMONT, Y ARISING OUT OF STRICT LIABILITY OR ORDINARY NEGLIGENCE OF DEF THE FACILITY OR ANY DRIVER WHICH CAUSES THE CHILD OF THE RTY DAMAGES AND FURTHER AGREES TO HOLD THE AND THE MOST REVEREND CURTIS J. GUILLORY, BISHOP OF INDEMNIFY THE PARISH/SCHOOL, DIOCESE OF BEAUMONT, AND THE SHOP OF DIOCESE OF BEAUMONT, FROM ANY CLAIM, JUDGEMENT OR PATION OF THE DESCRIBED ACTIVITY.	
OR SAFETY OF THE SCHOOL/PARISH, ITS S	TUDENTS, OR PERSONNEL.	
I/WE HAVE READ THIS DOCUMENT. I/WE U	UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS.	
	UR CHILDREN ASSUME ALL RISK INHERENT IN THIS ACTIVITY. I/WE TIDENCING MY/OUR ACCEPTANCE OF THESE PROVISIONS.	
Parent	Date	
Parent	 Date	

NOTE: A PHOTOCOPY OF BOTH SIDES OF HEALTH INSURANCE ID CARD MUST BE PROVIDED UNLESS ALREADY SUBMITTED WITH YOUTH REGISTRATION CONSENT LIABILITY WAIVER FORM (EXHIBIT J-H).

03/24/10 J-42