



THE SCHOOLHOUSE

# CONSENT FORM 2011-12

## PLEASE COMPLETE ALL SECTIONS

Child(ren)'s Full Legal name(s) \_\_\_\_\_

**Divorced parents must *each* fill out this form unless a court order assigns the right to educational decision-making to one parent.**

### **Art Work and Photo Release**

For each, please indicate whether you do or do not consent to the described use of your child's image and/or artwork by circling as indicated.

I I/we       **do** give consent       **do not** give consent  
(please select one)

for The Schoolhouse Learning Center, Inc. to use **pictures** of my child(ren) in its **advertisements, brochures, and other publications.**

\*\*\*\*\*

I I/we       **do** give consent       **do not** give consent  
(please select one)

for The Schoolhouse Learning Center, Inc. to use pictures of my child(ren) on the school **website, facebook page or other social media sites.**

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I I/we       **do** give consent       **do not** give consent  
(please select one)

for The Schoolhouse Learning Center, Inc. to use my child(ren)'s **artwork** in publications, or on the school **website, Facebook page or other social media sites.**

### **Field Trip Consent**

\_\_\_ (initial) I/we give my/our consent for my/our child(ren) to take part in field trips or excursions under proper supervision.

### **Emergency Medical Care**

\_\_\_ (initial) In the event that my/our child(ren) becomes ill or injured, I give permission for staff of the Schoolhouse to seek emergency medical care.

Signed \_\_\_\_\_  
Parent/Guardian signature      Date

Signed \_\_\_\_\_  
Parent/Guardian signature      Date