

St. John's Evangelical Lutheran Church & School 663 Manor Road Staten Island New York 10314 Phone: 718-761-1858 Stjohnslutheransi@gmail.com Website: www.school.stjohnslutheransi.org

Guardian Permissions 2024 - 2025

Dietura Danmission

\boldsymbol{P}	icture Permission
Yes. I (We) agree that, in the absence of advance written notice, St. John's may use the Studen name, portrait or likeness, and artwork and written work in connection with School activities in publicizing the School.	
\ / 2 1	or my child's picture to be shown on the other externally viewed publications.
Student's Name	Grade
Guardian's Name	Guardian's Signature
	write the emails below that you would like the fice to use to contact you.
Guardian's Name	*E-Mail
2 nd Adult's Name	E-Mail
Class	List Permission
the class list, to be distributed to all of the included on the list.	ild's information (Guardian's Phone Number & Email) on students in that class. *First Email written will be
I give permission for only my child	d's Class Parent(s) to have his/her information.
I do not give permission to include the Class List, which would have been dis	e my child's information on the Class Parent's List, nor on tributed to all of the students in that class.
Please write below, the Guardians' Names & Mrs., etc) including the guardian's last	as they should appear on correspondence (Dr., Ms., Mr. st name.
Dear	

The Class Parent must allow his/her contact information to be shared with that class.