

AUTHORIZATION TO RECEIVE TEXT MESSAGES

1. _____ School and its administrators, faculty, and other staff, including coaches (School Personnel) engage in various forms of communication with parents and students regarding School, its mission and its activities.
2. School wishes to expand the forms of communication to include voice mail to a cell phone, short message service (SMS), otherwise known as "text messaging" or "texting" or other similar forms of communication via cell phone, but excluding the sending or receipt of photographs (Messages).
3. School recognizes that some parents may choose not to receive and/or not to have their child(ren) receive Messages from School Personnel.
4. Parents understand and agree that School will not pay for any costs to Parents associated with the sending or reception of Messages to or from School.
5. Parents may cancel this Authorization at any time by providing written notice to the School principal at _____. In addition, Parents may, at any time, direct the School in writing at the same address to change the cell phone number(s) to which Messages are to be sent.
6. The School will not be liable for any direct, indirect, incidental, consequential, special, punitive, or exemplary damages in connection with, or in any way related to, the sending or receipt of Messages in accordance with this Authorization.
7. Parents who agree to accept Messages to themselves and/or their child(ren) are asked to fill in the following information:

PARENTS AND STUDENTS NAMES	DESIGNATED CELL PHONE NUMBER

_____ Do not send Messages to my child(ren) or me.

_____ Send Messages to me only.

_____ Send Messages to my child(ren) and me.

_____ Send Messages to my child(ren) only.

PARENTS HAVE READ AND UNDERSTAND THIS AUTHORIZATION

Parents' Signatures:

(Signature - Mother)

Date: _____

(Printed - Mother)

(Signature - Father)

Date: _____

(Printed - Father)