

# Parental Permissions

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

*Please check your response*

My child can ride his/her bike to school.  Yes  No

My child can walk to school.  Yes  No

My child can be photographed, recorded, Identified for school or PTO related activities. This includes forms of social media.  Yes  No

My child's work can be included in classroom circulated projects or public displays.  Yes  No

I give my permission to teachers and administrators to communicate with me about my child and school communications via email.  Yes  No

Do you want to receive Thursday Folder information via email. (Parkway only, Glen Hills only distributes Thursday folders via email)  Yes  No

EMAIL ADDRESS(ES):

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My child has access to a device (tablet or computer) and internet access at home so they can complete online assignments  Yes  No

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date