

If you answered 'yes' to allergies, please provide the information below:

| Name of Student | Description of Allergy |
|-----------------|------------------------|
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Note:

We expect parents to donate their time during recess as school yard monitors. You will be contacted throughout the school year regarding your availability.

Photo Release Form

St. Ephrem Maronite Catholic Church Language and Religious Education School

I grant St. Ephrem Maronite Catholic Church the right to take photographs of my child. I authorize St. Ephrem Maronite Catholic Church, its assigns, and transferees to copyright, use, and publish the same in print and/or electronically.

I agree that St. Ephrem Maronite Catholic Church may use such photographs of my child with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

I have read and understand the above:

Signature _____

Printed Name _____

Children's Names _____

Date _____