



Permission Form

I _____ acknowledge that I am the parent/legal guardian and hereby give my permission for the following:

Photos

____ My child's photo may be used for promotional material including but not limited to brochures, newsletters, Newspaper, fliers, Facebook, school website (icslowell.com), etc.

____ I DO NOT give my permission. Please do not use my child's photo in any publications which are to be shared outside of the school community

Hand Sanitizer

____ I give the Immaculate Conception School permission to use hand sanitizer on my child's hands.

____ My child may only use the hand sanitizer that I have provided for him/her.

____ My child may NOT use hand sanitizer.

Student(s) Full Name and Grade: _____

Parent's Signature: _____ Date: _____