

Veritas Academy
A Center for Classical Christian Studies
2011-2012 Student Permission Forms

EMERGENCY FORM

Date _____

Student: _____

Parent's Name: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Additional Emergency Contact Phone Numbers with Names and Relationships:

Please list any medical information we should know (allergies, medications, conditions, etc.).

In the event that I can not be reached in an emergency, I give my permission to the physician selected by Veritas Academy to hospitalize, secure proper treatment for, and to order injections, or surgery for my child named above.

Parent/s or Guardian Signature: _____ Date _____

PERMISSION TO PICK UP FORM

Parents, please fill out the following information in order to release your child to ride home with **someone other than yourself**. Thank you so much.

Student: _____ Phone # _____ Cell Phone # _____

Person or Persons who have permission to pick up your child/children:

1. _____
2. _____
3. _____
4. _____

Please contact us if you have a sudden change in carpool arrangements

912-238-1222

FIELD TRIP PERMISSION FORM 2011-2012

_____ has my permission to go on field trips with Veritas Academy.

The undersigned agrees to identify and hold harmless Veritas Academy and the Veritas Academy teachers and assistants from and against any claim, demand, or expense arising as a consequence of participation in this field trip.

In the event that I cannot be reached in an emergency, I give permission to the physician selected by Veritas Academy to hospitalize, secure proper treatment for and to order injection, or surgery for my child named above.

Parent or Guardian signature: _____

Print Name _____

PERMISSION TO USE PHOTOGRAPHS- 2011-2012

_____ Yes, I give permission for photographs of my child, _____, to be posted onto the Veritas Academy's website (www.veritassavannah.org).

_____ No, I would not like for photographs of my child, _____ to be posted onto the Veritas Academy's website (www.veritassavannah.org).

Parent Signature _____

Date _____

Veritas Academy

Permission for Student to Leave School Premises Form

2011-2012

I hereby give permission for my child _____ to leave school premises during his/her service periods to run school errands and/or go on a short pleasure outing. I understand that the student must exhibit a high degree of maturity to receive this privilege. If at any point, the student acts irresponsibly, he/she will forego this privilege.

(Please print) Parent's Name _____ Date _____

Parent's Signature _____