



**STUDENT ACTIVITIES WAIVER**

**PHOTOGRAPH AND TECHNOLOGY CONSENT**

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**STUDENT ACTIVITIES WAIVER**

I grant permission for my child to attend and take part in all school related activities during the school year \_\_\_\_\_. This includes but is not limited to school recess, physical education, drama, and other activities off premises such as field trips and school competitions. I understand that I will be notified of all non-weekly activities through the periodic Parent Updates and that this form replaces individual activity permission slips throughout the school year. I absolve Crossway Christian Academy from liability should my child be injured during any school activity. I further understand that if there is an emergency concerning my child, the school staff and administration will use the Emergency Contact Information I have provided for my child and will call those numbers in the order listed.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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**PHOTOGRAPH AND TECHNOLOGY CONSENT**

I grant Crossway Christian Academy permission to use, present, or include general information through technology, and/or photographs of me and my child/children for school presentational and promotional materials in the form of paper and electronic media. This permission includes, but is not limited to the school web site, school brochures, multimedia presentations, and community publications (honor roll listings in newspapers, etc.). I understand that all information, pictures, and technology will be used for general advertising and promotional purposes only, and that no personal or specific information will be made public other than previously mentioned, or what is already considered general knowledge.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Comments:

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