



STELLA MARIS  
ACADEMY

## PERMISSION AND RELEASE FORM 2017-2018

### PERMISSION TO LEAVE SCHOOL GROUNDS

Student's Names \_\_\_\_\_ Grades \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Occasionally teachers take their classes off school property for things other than planned and scheduled field trips. An example of this would be a walk around the block to pick up leaves. Outings like this depend on the weather and are often not planned in time to send home permission slips. The following release form is to cover all such outings for the current school year. If you would prefer that your child not participate, he/she may remain at school under supervision. You will receive separate permission slips from your child's teacher for other field trips.

\_\_\_\_\_ I give my child/children listed above permission to leave Holy Rosary Campus, St. James Campus or St. John's Campus grounds with his/her class and teacher for learning experiences. It is understood that my child will walk and remain in the school vicinity.

\_\_\_\_\_ I do not give my child/children listed above permission to leave Holy Rosary Campus, St. James Campus or St. John's Campus grounds with his/her class and teacher for learning experiences. It is understood that my child will walk and remain in the school vicinity.

\_\_\_\_\_  
(Parent or Guardian Signature)

*This signature acknowledges all yes or no answers above.*

\_\_\_\_\_  
(Date)

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## MULTIMEDIA PHOTOGRAPHY USE RELEASE

Student's Names \_\_\_\_\_ Grades \_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_ I give the **Diocese of Duluth and Stella Maris Academy** staff members, volunteers or other persons approved by the principal permission to photograph and/or video tape my child during class time and school events or activities for the following purposes: classroom materials and bulletin boards, public relations materials, news coverage, website, social media, presentations or school programs. (Omission of permission does not include school yearbook or classroom projects.)

\_\_\_\_\_ I do not give the **Diocese of Duluth and Stella Maris Academy** staff members, volunteers or other persons approved by the principal permission to photograph and/or video tape my child during class time and school events or activities for the following purposes: classroom materials and bulletin boards, public relations materials, news coverage, website, social media, presentations or school programs. (Omission of permission does not include school yearbook or classroom projects.)

\_\_\_\_\_  
(Parent or Guardian Signature)

*This signature acknowledges all yes or no answers above.*

\_\_\_\_\_  
(Date)

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## CLASSROOM WORK USE RELEASE

Student's Names \_\_\_\_\_ Grades \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I give the **Diocese of Duluth and Stella Maris Academy** staff permission to publish my child's classroom work (written work, artwork, or other creative content) on the diocesan website, Stella Maris Academy website, and/or the Northern Cross. The child's first name, school and grade may be included in the published document. This permission does not guarantee that your child's picture or work will be published, but it may be selected to be considered for use on the diocesan website, Stella Maris Academy website, and/or in the Northern Cross.

\_\_\_\_\_ I do not give the **Diocese of Duluth and Stella Maris Academy** staff permission to publish my child's classroom work (written work, artwork, or other creative content) on the diocesan website, Stella Maris Academy website, and/or the Northern Cross. The child's first name, school and grade may be included in the published document. This permission does not guarantee that your child's picture or work will be published, but it may be selected to be considered for use on the diocesan website, Stella Maris Academy website, and/or in the Northern Cross.

\_\_\_\_\_  
(Parent or Guardian Signature) (Date)  
*This signature acknowledges all yes or no answers above.*

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## PERSONAL INFORMATION RELEASE

Student's Names \_\_\_\_\_ Grades \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In order for the school to give out your child's name, telephone number and address to other parents for reasons such as birthday invites, ride sharing, etc., parental permission is necessary.

\_\_\_\_\_ I give Stella Maris Academy staff permission to release the name, address, or telephone number of my child/children listed above.

\_\_\_\_\_ I do not give Stella Maris Academy staff permission to release the name, address, or telephone number of my child/children listed above.

\_\_\_\_\_  
(Parent or Guardian Signature) (Date)  
*This signature acknowledges all yes or no answers above.*

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## HOLY ROSARY CAMPUS SLEDDING POLICY

Student's Names \_\_\_\_\_ Grades \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

The Holy Rosary Campus Sledding Policy is included in the Stella Maris Academy Parent and Student Handbook.

\_\_\_\_\_ I give my child/children listed above permission to use the sledding hill during his or her class's scheduled time.

\_\_\_\_\_ I do not give my child/children listed above permission to use the sledding hill during his or her class's scheduled time.

\_\_\_\_\_ Not applicable. My child/children do not attend Holy Rosary campus.

\_\_\_\_\_  
(Parent or Guardian Signature)

*This signature acknowledges all yes, no, or n/a answers above.*

\_\_\_\_\_  
(Date)

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## MEDICAL EMERGENCY RELEASE

Student's Names \_\_\_\_\_ Grades \_\_\_\_\_  
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\_\_\_\_\_  
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\_\_\_\_\_ I give Stella Maris Academy staff permission to seek medical care in an emergency for my child/children listed above.

\_\_\_\_\_ I do not give Stella Maris Academy staff permission to seek medical care in an emergency for my child/children listed above.

\_\_\_\_\_  
(Parent or Guardian Signature)

*This signature acknowledges all yes or no answers above.*

\_\_\_\_\_  
(Date)

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## SAFE ENVIRONMENT POLICY

I am aware that all Stella Maris Academy volunteers must be cleared by the diocesan administration through the background check, online training, and completion of the paperwork recognizing the Sexual Misconduct Policies and Code of Pastoral Conduct.

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(Parent or Guardian Signature)

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(Date)

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(Parent or Guardian Signature)

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(Date)

**PLEASE SIGN AND RETURN PROMPTLY**