

ST. JOSEPH SCHOOL...A Place with Heart



39 Gebhardt Road  
Penfield, NY 14526  
www.sjspenfield.org

(585) 586-6968  
(585) 586-4619 (fax)

**MANDATORY FORMS**

**Please return this completed form by the first day of school. Print all information neatly.**

Family Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Bus School District: \_\_\_\_\_

**RECEIPT OF SCHOOL HANDBOOK:**

I have received a copy of the **St. Joseph School Handbook of Policies and Procedures and Calendar 2008-09** and have read and reviewed it with my child/ren. I agree to do my best as a member of the St. Joseph School community to uphold and abide by all of its rules, policies, procedures, terms and conditions. This handbook may be amended or modified from time to time by the school principal.

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**FAMILY COMMUNICATIONS**

Student information will be compiled shortly to compose the St. Joe's Family Directory and class lists for volunteer room parents. To respect your privacy regarding your address and phone number, please indicate your wishes below:

- ( ) Yes, the student/family name, address and phone number may appear on class lists and in the directory.
- ( ) No, the following information may not be included on any class list for distribution:
  - ( ) Father's Name
  - ( ) Mother's Name
  - ( ) Address
  - ( ) Phone Number
  - ( ) Email Address

**If a parent/guardian does not reside at the same address as the student but wishes to receive duplicate school communications** (newsletters, copies of report cards, notification of parent/teacher conferences), **please indicate below:**

- ( ) Yes, duplicate school communications should be sent to my child's non-custodial guardian:
  - Name \_\_\_\_\_
  - Address: \_\_\_\_\_
  - City/Zip: \_\_\_\_\_

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**MODEL RELEASE:**

Student name(s) and age(s): \_\_\_\_\_ (List all student children)

Note: Classroom and field trip photos are frequently taken and used mainly in bulletin board displays, Open House slide shows and on the school website. The website site policy is to use group shots only (no close-ups) and not to identify any children.

Please check only one box:

- I do** hereby consent to and authorize the use and reproduction by the school, or anyone authorized by the school, of any and all photography, still or in motion, and/or all audio recordings in which this student appears. I acknowledge that we will not be paid compensation for any reproduction of these materials. All negatives, prints, and audiotapes are the school's property. I hereby certify that I am the parent or guardian of the model(s) named above, and I give my consent without reservation.
- I do not** consent to the use of any photography or audio recordings.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_