



127 East 22nd Street NYC NY 10010 (212)475-8086

PARENTAL RELEASE FORM 2019 - 2020

Name of Student _____ Date of birth _____ Grade _____

Name of Advisor _____ Cellphone of Student _____

Name of Parent/Guardian _____ Cellphone of Parent/Guardians _____

Name of Parent/Guardian _____ Cellphone of Parent/Guardians _____

Parent/Guardian Email _____

Parent/Guardian Email _____

I would like to volunteer at SOF with the PA Yes _____ I can help with _____

Is there anything important we should know regarding the safety of your child (eg. Allergies, person with whom they should not have contact, etc.) _____

In an effort to be green, the parental release form documents are posted online at our website www.sof.edu (Families >> Forms). **Please complete the information below and sign and date next to each DOCUMENT TITLE to signify that you and your child have read and discussed, and understand and agree to the information provided.**
**Please note that separate signatures are required for each DOCUMENT TITLE.*

| <u>DOCUMENT TITLE</u> | <u>STUDENT SIGNATURES</u> | <u>PARENT/GUARDIAN SIGNATURES</u> |
|--|---------------------------------------|---|
| Consent to Photograph, Film | _____ Date _____ Student Signature | _____ Date _____ Parent/Guardian Signature |
| Permission for Off Campus Lunch | _____ Date _____ Student Signature | _____ Date _____ Parent/Guardian Signature |
| Discipline Code | _____ Date _____ Student Signature | _____ Date _____ Parent/Guardian Signature |
| Family Handbook | _____ Date _____ Student Signature | _____ Date _____ Parent/Guardian Signature |
| Principals of Acceptable & appropriate internet And cell phone use | _____ Date _____ Student Signature | _____ Date _____ Parent/Guardian Signature |

Please complete and submit this document to your child's advisor.

