

DIOCESE OF FRESNO ANNUAL CONSENT FORM

School Activities Permission, Consent For Emergency Medical Treatment, And Release Of Liability

TO THE PARENT/LEGAL GUARDIAN: You must give permission on this annual form for your child to attend school and participate in school-sponsored events and activities during this school year. You will also be required to sign permission forms for your child/children to participate in specific school-sponsored events, activities, and sports conducted off school grounds or outside the regular school day. **COMPLETE** this form for each child. If any of this information changes during the course of the school year, please update this form at the school office.

Name of Child: (Last Name) _____ (First Name) _____	Age	Birth Date	Grade
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School Name Saint Ann School (Ridgecrest, California)	School Year 2020-2021
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Name of Parent(s)/Guardian(s) (First, MI, Last Name)	Daytime Phone Number(s) of Parent/Guardian
(Mother)	(Mother) Work? ___ or Home? ___
(Father)	(Father) Work? ___ or Home? ___

Cell Phone Number(s) of Parent/Guardian	Nighttime Phone Number(s) of Parent/Guardian
(Mother)	(Mother) Work? ___ or Home? ___
(Father)	(Father) Work? ___ or Home? ___

Home Address (Street Address, City, Zip)
(Mother)
(Father)

Other Emergency Contacts (Please list at least two Emergency Contacts)	Phone Number(s)	Relationship
(1)		
(2)		
(3)		

Allergies (food, drugs, insects, etc.)
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Medications (name, dosage, reason)

Other Information or Special Health/Physical Considerations (Attach extra sheet if necessary)

Insurance Carrier	Insurance Group or ID Number
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Name of Child's Doctor	Phone Number
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Name of Child's Dentist	Phone Number
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Name of Child's Orthodontist	Phone Number
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I, the parent or guardian of the above child, voluntarily wish to give permission for and request that my child be allowed to attend and participate in school-sponsored events and activities during this school year including those conducted off school grounds or outside the regular school day. My child is physically fit and capable of participation in school events and activities. I agree to direct my child to cooperate and conform to directions, instructions, and rules given by school personnel or agents, chaperones, or diocesan personnel responsible for all school events and activities. If requested, I will sign a permission and release form for each specific event or activity conducted off school grounds or outside the regular school day. I reserve the right not to have my child participate in school-sponsored events or activities that are not mandatory.

I understand that participation in school-sponsored events and activities, including those off school grounds and outside the regular school day, involve some risk (including any travel to and from these events or activities) and that unforeseen events can occur. I am informed and agree that transportation, if involved, may be provided by parents, other private individuals, or commercial operators who are believed to be reliable and insured, but are not under the supervision or control of the school.

In exchange for permitting my child to participate in the school's activities, I waive and give up all claims (and the right to file a lawsuit) which I or my child (and our successors, heirs, and assigns) may have against the school. I release and discharge the school from all liability or responsibility from death, illness, personal injury, or property damage arising out of the school activity and any transportation involved with the school activity.

In the event of an emergency, and if the school is unable to contact me, I authorize school personnel or other adult leadership of a school-sponsored event or activity, at my expense, to secure and consent to x-ray examination, medical, dental, or surgical diagnosis, treatment, and hospital care advised and supervised by a duly licensed physician, surgeon, or dentist. I expect to be contacted as soon as possible. I agree that if emergency medical or dental services are required for my child/children, the Diocese of Fresno will not be responsible to pay for any medical or dental expenses.

This permission, waiver, release, and consent applies to the school named, and to the Diocese of Fresno Education Corporation, The Roman Catholic Bishop of Fresno (a corporate sole), the Diocese of Fresno, all other Diocese of Fresno schools, all parishes, affiliated organizations, and their officers, clergy, agents, and employees.

This waiver and release form is signed in order for my child/children to participate in the school's events and activities for my child's own personal enjoyment and benefit and is done so freely with full knowledge of the risk and dangers that are or may be involved.

I authorize any hospital which has provided treatment to the above named minor pursuant to the provisions of Family Code section 6910 to surrender physical custody of such minor to the diocesan or school representative upon the completion of treatment. This authorization is given pursuant to Health and Safety Code section 1283.

I have read this release and understand all of its terms. I request that my child be allowed to participate in the school's events and activities. I execute this form voluntarily and with full knowledge of its significance. I have discussed the above with my child, and my child is aware of and understands the importance of following all rules set out for the school's events, activities, or sports. A copy of this form shall be as valid as the original authorization and may be given to the adult leader of the events, activities, or sports.

I have read both sides of this release and understand and accept all of its terms.

Signature of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

FOR OFFICE USE ONLY	
Date Release Received	Received By

Photography & Social Media Permission Form

Dear Parents/Guardians

While your child is at school or attending a school-sponsored event, he/she may be photographed by members of the school's staff, by parents or by news media, etc. This may occur during school activities, field trips, classroom activities, etc. Photos may be used for internal use, like bulletin boards and the school yearbook, or for news releases, school brochures, etc. Photos may also be used on our School website and Facebook page.

If you object to the photographing of your child please complete the form and return it to the school. If you do object, every effort will be made to prevent your child from being photographed. Please note that your objection will not prevent the school from photographing your child for internal school photographs or for inclusion in the school's yearbook.

We would be happy to answer any questions/concerns you may have. Please call or email the school office: 760-375-4713 or school@parishofsaintann.org

Please list **All** children enrolled at Saint Ann School. By checking yes, you give permission for your child to be photographed during school activities and have their photos used for public relations material, posted on Saint Ann School's website and/or the School's Facebook page.

Student Name	Grade	Permission to use photo for school's public materials		Permission to post photo on school website		Permission to post photo on school's Private Facebook Page		Permission to post photo on school's public Facebook Page	
		yes	no	yes	no	yes	no	yes	no
		yes	no	yes	no	yes	no	yes	no
		yes	no	yes	no	yes	no	yes	no
		yes	no	yes	no	yes	no	yes	no
		yes	no	yes	no	yes	no	yes	no
		yes	no	yes	no	yes	no	yes	no
		yes	no	yes	no	yes	no	yes	no

Parent/Guardian Signature: _____ Date: _____



Contract for Scrip Rebate Program
2020-2021

Once you have met your \$400 scrip rebate obligation you will have the following options. Please chose an option for how you want your rebate handled:

Option #1 – 100% Rebate goes directly to my tuition.

Once our \$400 obligation is met, we would like to apply rebate balance towards tuition. This balance will be paid at the end of the school year.

Option #2 – 100% Rebate goes directly to my family.

Once our \$400 obligation is met, we will cash out any rebate balance. A W-9 form will be required in order to receive rebate. This balance will be paid at the end of the school year.

Option #3 – 100% Rebate goes back to school. (Tax Deductible)

Once our \$400 obligation is met, we would like all rebates earned beyond this to be paid directly to the school.

Option #4 – Rebate balance applied toward registration.

Once our \$400 obligation is met, we would like to apply our rebate earned towards our 2021-2022 registration fees, with the remaining balance going to the school.

Option #5 – Scrip buyout

We have agreed not to participate in the scrip program and will pay \$400 by the end of the school year.

By signing this, I agree to the above terms and conditions of my scrip contract for the 2020-2021 school year. I'm also aware that if my family school account has a balance, the rebate will be applied to that account prior to any other distribution.

Print Family's Name: _____

Signature: _____

Date: _____

**Any balance remaining from a scrip rebate earned during the
2020-2021 school year will not carry over to the 2021-2022 school year.**

Saint Ann School
iPad and Chromebook Policy
Student Pledge

- I will take good care of the assigned Chromebook/iPad and know that I will be using it in the classroom.
- I will never leave the assigned Chromebook/iPad unattended in an unsecured or unsupervised location.
- I will never loan out the assigned Chromebook/iPad to other individuals
- I will know where the assigned Chromebook/iPad is at all times.
- I will keep food and beverages away from the assigned Chromebook/iPad.
- I will not disassemble any part of the assigned Chromebook/iPad or attempt any repairs.
- I will protect the assigned Chromebook/iPad by always carrying it in a secure manner to avoid damage.
- I will use the assigned Chromebook/iPad in ways that are appropriate for education.
- I will not place decorations (stickers, markers, writing, etc.) on the Chromebook/iPad.
- I understand that the Chromebook/iPad is classroom instructional materials. Any loss or damage that is due to my negligence, is my financial responsibility and I will be billed accordingly.
- If the assigned Chromebook/iPad appears to be broken or fails to work properly, I will immediately notify the teacher.
- I agree to return the Chromebook/iPad in good working condition at the end of class.

Print Student Name: _____

Student Signature: _____

Parent Signature: _____

Date: _____

2020-2021 Parent/Student Handbook Agreement

When a family signs the statement below, it is understood by the parents/guardians and student(s) that they have read the current Parent/Student Handbook on file and agree to comply with all policies, regulations, and directives stated therein as well as any updates and revisions made to the handbook during their time of enrollment.

By enrolling in Saint Ann School, all students and parents grant to the school the irrevocable and unrestricted right to use, reproduce, and publish photographs or video images of the student, for slide/video presentations, publications, advertising, brochures, or website(s), or any other purpose, and in any manner and medium, to alter the same without restriction, and to copyright the same. In granting this permission, parent and student also release the school from any and all claims, actions, and liability of whatever nature and relating to the use of said photograph(s), video(s), or related materials.

School administration reserves the right to amend this handbook as needed; notification of such amendments will be made to parents and students in a timely manner.

I have read and understand the information contained in the Parent/Student Handbook and agree to abide by the rules set forth therein.

Please *print* Family Last Name: _____

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Student Signature(s) (when age-appropriate):

Date:
