

Emergency Card

Blue School 2019-2020

Students Name _____
(Last) (First) (MI)

Parent/Guardian Name _____ Relationship _____

Home Phone _____ Work Phone _____
Home email _____ Work Email _____
Cell Phone _____

Home Mailing Address: _____

Parent/Guardian Name _____ Relationship _____

Home Phone _____ Work Phone _____
Home email _____ Work Email _____
Cell Phone _____

Home Mailing Address: _____

In the event of an emergency, we will call 911 first, then the parent.

In the event of an emergency and I cannot be reached, please take my child to:

Hospital _____
Doctor _____ Phone _____

If my child gets sick at school and I cannot be reached, please contact:

Name _____ Relationship _____

My child calls this person (e.g. Grammie) _____

Home Phone _____ Cell Phone _____

Students Date of Birth: _____

Are you or an immediate family member serving or have served in the military?

Can we share your email? _____

Parent/Guardian Signature _____ Date _____

Transportation

It is important for us to know how your child is getting to and from school!

- Children will only be released to people on your approved list. They will be asked to show ID.
- If there is a change at the end of the day, we *must* be notified with either a note or a phone call. *We will not respond to a child's word about where they are going.*
- Please keep us updated about any changes you may need to make!

Child's Name _____

My child will be arriving at school by:

- Bus
- Private car
- Walking

My child will be going home from school by:

- Bus
- Bus to Boys and Girls Club
- Private car
- Walking

The following are people on my approved transportation list:

Name	Phone
_____	_____
_____	_____
_____	_____

Web Site and Newspaper Permission

Child's Name _____

Website

There will be times when we would like to post pictures of what we are doing at school and examples of the wonderful work our children have done. Knowing that the website is accessible to a worldwide community, we will not identify pictures with children's names. Any work will be identified by first name only.

I (*circle one*) **give / do not give** permission for my child to have his/her picture or work displayed on the school/ SAU 35 website.



Newspaper

Our school is often featured in the newspaper in the format of photographs and articles. Please know that every newspaper is accessible to a worldwide community. The children's full names will appear.

I (*circle one*) **give / do not give** permission for my child to have his/her picture or work displayed in the newspaper.

(Parent/Guardian Signature)

(Date)

Video and Photograph Permission

Child's Name _____

Video tapping and photographing the children at school has become a very useful tool; critique by the children, critique by the teacher, and other educational purposes. Please know that at any time parents may view these videos and/or photos.

I understand that my child may be photographed or taped for educational purposes. I (*circle one*) **give** / **do not give** permission for my child to be videotaped or photographed.

Walking Field Trip Permission Form

There are so many resources so close to school for us to use. Should it require that we leave the school grounds for a walking field trip at any point, we must have your permission.

I understand that my child may leave the school grounds for educational purposes. I hereby (*circle one*) **give** / **do not give** permission for my child to participate in walking field trips off of the school grounds.

(Parent/Guardian Signature)

(Date)

School Census and Child Find

Landaff School District, Landaff, New Hampshire

Please help us keep the school census up-to-date for future planning. Please fill out the "In My Household" section and if you know of any other children we may not hear about, please fill out the "Other Family" section.

In My Household

Child Name	Date of Birth	Parent/Guardian

In your household are there any preschool-aged children (0-5) that are in need of special services or you think should be evaluated?

Other Family

Child's Name	Date of Birth	Parent/Guardian	Phone	Address

Volunteers at Blue School

Join the team at Blue School and become a volunteer!

Do you have a special skill that you would be willing to share? Do you have a hobby that you could show us? Are you a good organizer? Do you just have some time in your life to come share with our classroom?

Name of Volunteer

Yes! I would love to share (please describe)

The best day of the week for me is

I can be reached at

I need some advanced notice

Anything else?
