

FRIENDS OF WALGROVE DIRECTORY INFORMATION & RELEASES

STUDENT INFORMATION

STUDENT 1	LAST NAME: <input style="width: 80%;" type="text"/>	FIRST NAME: <input style="width: 80%;" type="text"/>	STUDENT 3	LAST NAME: <input style="width: 80%;" type="text"/>	FIRST NAME: <input style="width: 80%;" type="text"/>
	GRADE: <input style="width: 80%;" type="text"/>	CLASSROOM #: <input style="width: 80%;" type="text"/>		GRADE: <input style="width: 80%;" type="text"/>	CLASSROOM #: <input style="width: 80%;" type="text"/>
STUDENT 2	LAST NAME: <input style="width: 80%;" type="text"/>	FIRST NAME: <input style="width: 80%;" type="text"/>	STUDENT 4	LAST NAME: <input style="width: 80%;" type="text"/>	FIRST NAME: <input style="width: 80%;" type="text"/>
	GRADE: <input style="width: 80%;" type="text"/>	CLASSROOM #: <input style="width: 80%;" type="text"/>		GRADE: <input style="width: 80%;" type="text"/>	CLASSROOM #: <input style="width: 80%;" type="text"/>

PARENT INFORMATION

PARENT/GUARDIAN 1	LAST NAME: <input style="width: 80%;" type="text"/>	FIRST NAME: <input style="width: 80%;" type="text"/>	PARENT/GUARDIAN 2	LAST NAME: <input style="width: 80%;" type="text"/>	FIRST NAME: <input style="width: 80%;" type="text"/>
	RELATION: <input style="width: 80%;" type="text"/>	CELL PHONE: <input style="width: 80%;" type="text"/>		RELATION: <input style="width: 80%;" type="text"/>	CELL PHONE: <input style="width: 80%;" type="text"/>
	EMAIL ADDRESS: <input style="width: 100%;" type="text"/>			EMAIL ADDRESS: <input style="width: 100%;" type="text"/>	
	STREET ADDRESS: <input style="width: 100%;" type="text"/>			STREET ADDRESS: <input style="width: 100%;" type="text"/>	
	ZIP CODE: <input style="width: 80%;" type="text"/>	ALT. PHONE: <input style="width: 80%;" type="text"/>		ZIP CODE: <input style="width: 80%;" type="text"/>	ALT. PHONE: <input style="width: 80%;" type="text"/>

RELEASES

FRESHSCHOOLS SIGN-UP AND RELEASE

I hereby give Friends of Walgrove permission to use the information above (and any information previously provided) to sign up the parents listed above for accounts in the school's FreshSchools online directory and to populate those accounts with the information provided above.

PARENT/GUARDIAN: _____

DATE: _____

PHOTO/VIDEO PERMISSIONS

I hereby give Friends of Walgrove permission to use photos and videos of the above students, taken on the premises of Walgrove Avenue Elementary school or at any school-related or Friends of Walgrove event, for the following purposes:

	INITIALS	DATE
Publication on school website (www.wearewalgrove.com)	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>
Publication in FOW printed materials (e.g. brochures, flyers)	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>
Publication on FOW public social media (Facebook Page, Instagram)	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>
Publication in FOW private sites (Closed FB Group, FreshSchools)	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>