

# Maury City Elementary

Student Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Please circle Yes or No to the following statements.

1. **Field Trip Permission:** I give permission for my child to go on supervised field trips sponsored by the school

Yes    No

2. **Student/ Parent Handbook:** I will read the student/ parent handbook (which includes the Crockett County School System Code of Conduct) and discuss it with my child.

Yes    No

3. **Phone Number Release:** I give permission for my phone number to be a contact source in the school's volunteer program.

Yes    No

4. **Permission to Use the Internet:** My child has permission to use the Internet at school with adult supervision. I understand that school computers are equipped with filters to inhibit access to inappropriate sites.

Yes    No

5. **Transfer Students Only:** If your child is transferring from another school, please print below the name and address of the school.

School Name \_\_\_\_\_

School Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_