

# FAIRLAWN LUTHERAN SCHOOL

## 2022-23 Parent Agreement Form

Parent/Guardian Name \_\_\_\_\_

Child Name \_\_\_\_\_ Class  2  3A  3B  4A  4B  4C  5A  5B  K

CHAPEL: I hereby give permission for my child(ren) to walk upstairs to the Fairlawn Lutheran Sanctuary or Chapel on assigned chapel days or for other activities like concerts or assemblies that may occur during the school year; parents will be notified of these occasional activities. **Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

WALKS: I hereby give permission for my child(ren) to go on impromptu walks on the property of Fairlawn Lutheran Church and nearby destinations including (but not limited to) the Fairlawn branch library, the Akron/Summit County Bookmobile, and St. Edwards Retirement Facility. Children are supervised and accompanied at all times on walks; parents will be notified prior to the walks. **Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

PHOTOS/VIDEOS:  I give permission  I do not give permission  
for my child(ren) to be photographed/videotaped in the program, program functions, or field trips and for the photographs/videos to be displayed in-house or on church or school social media [no names or personal information will be attached to my child(ren)'s photos/video]. I understand that school staff, professional photographers/videographers, news media or other parents may take the photographs/videos. I understand that I will be notified if any photos/videos are to be used for publicity purposes outside the school ministry and that I have the right to refuse permission. **Parent Initials** \_\_\_\_\_

- Yes**  **No** I received the School Parent Handbook and have read and agree with the policies and procedures of Fairlawn Lutheran School.
- Yes**  **No** I am aware I will be informed of information specific to my child(ren) via e-mail and Brightwheel.
- Yes**  **No** I know I must call the school office to report my child(ren)'s absence from school each time there will be an absence.
- Yes**  **No** I agree it is the responsibility of both the school staff and the parent(s) to keep an open line of communication during the school year, and I understand that I am to contact my child's teacher first with any questions or concerns.
- Yes**  **No** I have and will continue to provide the school with all written information that is required and requested and will update the information as needed.
- Yes**  **No** I acknowledge that, in the care of children, accidents can occur even if reasonable care and supervision is provided. I agree that Fairlawn Lutheran School is not responsible for costs or damages of any kind resulting from such accidents and that Fairlawn Lutheran School is liable for damages only if they result from gross negligence or willful malfeasance.
- Yes**  **No** If emergency transport is required for any reason to an emergency care facility while attending Fairlawn Lutheran School, parents are responsible for any cost incurred.

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*The parent's name on the parent signature line will serve as his or her official signature.*