

TROY ELEMENTARY SCHOOL

20__-20__

ACCEPTABLE COMPUTER AND NETWORK USE CONTRACT

I understand and will abide by the Internet Use Agreement as published in the Troy Elementary School Handbook.

I further understand that any violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges will be revoked, school disciplinary action may be taken, and/or appropriate legal action.



Student Signature

Date

HANDBOOK ACKNOWLEDGEMENT

I hereby acknowledge review of the Troy Elementary School Handbook located online at www.troysd287.org. I understand the information and policies as explained in the handbook.



Student Signature

Date

As a parent/guardian of the above signed student, I hereby acknowledge review of the Troy Elementary School Handbook located online at www.troysd287.org. I understand the information and policies as explained in the handbook.



Parent/Guardian Signature

Date

PICTURE RELEASE

I hereby grant permission for my child to be photographed or videotaped while in activities connected with Troy Elementary School. Pictures and videotape may appear in newspaper articles, Troy web page, brochures, or publications approved by school administration.



Parent/Guardian Signature

Date

FIELD TRIP

Several times each school year your student will be able to enjoy field trips away from school to attend special functions such as performances, picnics, lectures, exhibits, nature walks, displays, competitions, etc. We will need written permission from you giving permission for your child to participate and attend these special trips.

Notices will be sent home to inform you of planned activities. These notices are usually sent home with students. You may request that your student not attend various activities away from the school. You simply need to inform the teacher that your student will not be attending.

In the event of a medical emergency, every effort will be made to contact parents. If parents/guardians cannot be reached, we need written permission from each parent to authorize emergency medical treatment should the need arise.

By signing this form, I grant permission for my child to participate in school field trips, and I authorize any hospital, licensed physician and/or my child's personal physician to administer emergency treatment to my child in case of accidental injury or sudden illness.



Parent/Guardian Signature

Date