



SAINT ANTHONY SCHOOL – KAILUA

Parental Permission Form

Family Name: _____

Student Name:

Grade:

This form gives permission to St. Anthony School, Kailua, for my child to:

*Participate in St. Anthony School, Kailua, Field Trips/Excursions. Yes No

*Be photographed in connection with publicity for St. Anthony School, Kailua. Yes No

*Have his/her picture and/or school work posted on the St. Anthony, Kailua, website knowing that at no time will my child's full name be printed by his/her photo. Yes No

I and the above named student participant hereby release St. Anthony School, Kailua, Hawaii Catholic Schools and their personnel of any and all liability of every nature, kind and description or other claims or demands as a result of injuries, hurt or damage sustained by the student arising from or in connection with the student's participation.

Father/Legal Guardian Signature

Date

Phone

Mother/Legal Guardian Signature

Date

Phone

