



2016-17 Emergency Contact, Pick-up, Directory & Media Release Form

Student Name(s): _____

Student Emergency Contact & Pick-up Permission

Indicate below individuals (other than parents/guardians) who are emergency contacts and/or authorized to pick up your child.

Emergency Contact	Authorized to Pick-up	Name	Home Phone	Cell Phone	Relationship
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____

Student & Parent Directory Permission

SCS families have secure access to our Student & Parent Directory through our online RenWeb portal. Do you wish to be included in our Student & Parent Directory?

☐ YES - I wish to include the following information:

☐ Name ☐ Address ☐ Home Phone ☐ Cell Phone ☐ Email

☐ NO - I do not wish to be included.

Student Media Release

Throughout the school year, Sarasota Christian School may wish to interview, photograph or videotape your child for promotional and educational reasons to utilize in publications, newsletters, on the school's social media sites and website. Periodically the news media may also visit the school to cover special events. Please indicate below if your child may participate in the areas noted above.

☐ YES - I give my permission for my child to participate.

☐ NO - I do not give my permission for my child to participate.

Parent (print): _____

Parent Signature: _____

Date: _____