



INTERNATIONAL STUDENT PERMISSION FORM

By completing and signing this form, I am confirming that I have read, understand, and agree to follow the Munro Academy Handbook guidelines and procedures.

STUDENT INFORMATION			
First Name	Last Name	Grade	Date of Birth
			mm/dd/yyyy
PERMISSION - Only check if permission is granted			
<input type="checkbox"/> Yes	School Trips: Permission to participate in school related off campus trips that are supervised by a faculty member. Such as: Sports, Field Trips, Skating etc.		
<input type="checkbox"/> Yes	Image Permission: Picture, voice, video and/or work to be used by MA for Promotional material.		
<input type="checkbox"/> Yes	Grade 9 – 12 Only: Lunch hour Permission: Permission to leave MA grounds between the hours 12:40 noon – 1:15 pm and recognize that students will be unsupervised by school faculty.		

Signature: _____
(Parent/Guardian)

Date: _____
(mm/dd/yy)

Signature: _____
(Parent/Guardian)

Date: _____
(mm/dd/yy)