

## ST. ALOYSIUS GONZAGA PRESCHOOL

4390 Bridgetown Rd. ~ Cincinnati, OH 45211 ~ 513-587-3978

## Preschool Permission Form 2024-2025

Child's Name	Class: □ 3's □ 4's □ 5's
	Permission to Pick Up
My child may bo	e released to the following person(s):
Name	Relationship
	Do NOT Release
	I do NOT give my permission for my child to be released to:
Name	Name
Relationship	Relationship
	Permission to Photograph
	en of St. Aloysius Gonzaga Preschool students will be used for school purposes only. Photographs ibuted to promote marketing or advertising; however, some may be used on Class Dojo.
	Yes, I give permission to St. Aloysius Gonzaga School to photograph my child.
	No, I <u>do not</u> give permission to St. Aloysius Gonzaga Preschool to photograph my child.
	Photo Release
•	notos to the newspaper and post to Facebook from time to time. We do so many fun things and ing experiences that we want to share. Your child's name will not be used, just the photograph.
	I give St Aloysius Gonzaga School permission to use photographs for newspaper articles, Gator Gazette, teacher newsletters, and Facebook.
	I <u>do not</u> give permission to have my child photographed for newspaper articles, Gator Gazette, teacher newsletters, and Facebook.
	Class Roster Permission
	I agree to have my child's name, parent name(s), phone number, e-mail address, and home address placed on the school roster. This roster would only be made available to parents of children in our school. This roster facilitates class events.
	I do not give permission for my child's name to be on the school roster as outlined above.
Parent Signatu	areDate