## Delran Township Public Schools

| Teacher: School Year:   |                                   |
|---|-----------------------------------|
|   |                                   |
| CONSENT AND WAIVER AGREEMENTS   |                                   |
| PLEASE INITIAL EACH PARAGRAPH AND SIGN THE BOTTOM   |                                   |
| COMPUTER NETWORK AND INTERNET ACCESS  |                                   |
| By signing this Consent and Waiver Agreement, I, as a student in the Delran and my parent(s) or legal guardian(s) state that we have discussed the rights responsibilities contained herein and I agree to abide by the restrictions contagreement.   | and                               |
| A parent or legal guardian legally responsible for the pupil must sign this agree pupil access to the school district computer networks and the Internet.   | eement to grant the               |
| PARENT PERMISSION FOR THE PUBLICATION OF STUDENT WORK AND/OR PICTUR  We are excited about our district website. We have many options for display pictures. For that reason, we will be snapping many digital photos this year. be able to include all of our students at one time or another, so families can saction. Please note that the names of the students are never used. | ring numerous<br>We would love to |
| Do we have permission to include your child on our website?   |                                   |
| Yes, please include my child in photos posted on the district website.  |                                   |
| I grant permission for the School Year.   |                                   |
| No, please exclude my child from photos on the web.   |                                   |
| OUT-OF-CLASS ACTIVITY PERMISSION  |                                   |
| I do hereby request and authorize the Superintendent of Delran Township So child during the school year to attend and take part in any of voluntary out-of-classroom school activities (including customary one-day, or connection with such activities) that my child may choose.  | the approved                      |
| I accept full responsibility for his/her actions while so engaged.  |                                   |
| Parent/Guardian Name (Please Print):  |                                   |

Date

Parent/Guardian Signature