

The Lorge School
353 W. 17th Street, New York, NY 10011

GENERAL CONSENT

School Year: _____
LEAVING THE BUILDING, TRIPS AND PHOTOGRAPHS

Student: _____ DOB: _____ OSIS: _____

Dear Parents/Guardians:

Please check your preference in the appropriate spaces below. If you have any questions or wish to limit your permission to any degree, please make comments below.

CONSENT #1

My child has permission to leave the school building during the lunch hour. I understand that the school is not responsible for my child's safety while out of the building. This privilege will be taken away from the student if the school rules are not respected, a Lunch Contract will be required.

- Yes
 No

CONSENT #2

My child has permission to take supervised school trips during school hours as part of the school program. I understand that at time, injuries may occur during the course of a field trip, and give permission for Lorge school staff to provide appropriate first aid attention if needed. I agree not to hold Lorge staff responsible for accidents that may occur on such trips.

- Yes
 No

CONSENT #3

My child may be photographed and/or video taped during school activities for the yearbook, monthly newsletter and other educational purposes.

- Yes
 No

PARENT OR GUARDIAN CONSENT:

Signature of Parent Guardian: _____

Printed Name of Parent Guardian: _____

Date: _____