



PARENT/GUARDIAN E-MAIL PERMISSION STATEMENT

Please complete this form and return it to your child's activity teacher.

By signing this document, I hereby agree that my child's grades, academic progress, and other pertinent academic behavioral issues may be communicated and discussed via electronic mail.

Parent: _____ Date: _____

Parent Signature: _____

Preferred Email Contact Address: (1) _____

(2) _____