



215 CLINE AVE. NORTH, HAMILTON, ONTARIO L8S 4A1
Tel: (905) 529-7725 Fax: (905) 529-9694
Email: office@kehilaschool.ca
Web site: www.kehilaschool.ca
Beneficiary of **Hamilton Jewish Federation**
Generously supported by **The Weisz Family Foundation**
The Beth Jacob Synagogue and Temple Anshe Sholom

SCHOOL YEAR: SEPTEMBER 2016 – JUNE 2017

STUDENT NAME: _____ GRADE _____

WE HEREBY GRANT PERMISSION FOR OUR SON/DAUGHTER TO PARTICIPATE IN THE FOLLOWING:

Field trips arranged by Kehila to Churchill Park playground (recess), Churchill Park conservation area, Westdale Library, Westdale Deli/Butcher and other places within walking distance of our school. Special permission slips for trips requiring transportation by car or bus will be sent out before the event.

We give permission for our child's name and/or photo to be published in the Kehila JCDS newsletter Hamilton Jewish News Kehila website Kehila advertising media

*** We do **not** give permission for the publication of my child's name or photo by any form of media
(Please check which one is appropriate for your child.)

Occasionally a 3rd party will be asked to take photo's of special events i.e Hanukkah, Purim, Avigail, Kehila fundraisers, etc. We give permission for our child's photo to be taken by such person We give permission for such person to use said photo for professional use

*** We do **not** give permission for the publication of my child's photo taken by 3rd party for professional use

We give permission for our child and our names (as the parents), child's grade, parent's email and home telephone number to be placed on a school contact list to be distributed to all Kehila parents for social purposes. This information will be treated with the strictest of confidentiality, not to be shared with anyone else, and in particular, not to be used for commercial purposes or for the purposes of solicitation of any kind.

I consent to the use of the email addresses provided on the registration form to receive electronic communications from Kehila JCDS which will include (but not limited to) e-bulleting, office memos and teacher communications. I recognize that these emails may include important and time sensitive information and agree to check e-mails frequently.

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STUDENT NAME: _____ Continued Page 2 ... Permission form

- After reading together, with our child named above (if applicable), the Kehila JCDS Internet Acceptable Use Agreement document located at www.kehilaschool.ca (current families under Documents) we understand that this access is designed for educational purposes. We also recognize that it is impossible to restrict access to all controversial materials acquired on the network. Every effort will be made by Kehila JCDS to restrict the use of internet research to those sites that have been approved by Kehila.
- We hereby give our permission for Kehila JCDS to issue access privileges to our child.
- We have reviewed the entire 2016/2017 Kehila JCDS Parent Handbook located on the Kehila website www.kehilaschool.ca (current families under Documents) and am aware of all the requirements of a parent and student of this school.
- We have read the Progressive Discipline Policy located on the Kehila website www.kehilaschool.ca (current families under Documents) and am aware of the required procedure in the event of an issue with Kehila staff or any other school concerns.

Students at Kehila are dismissed at the end of the day to PARENTS or CARETAKERS (which we must know). Please list any other people who are allowed to pick up your children.

_____	_____ (relationship)
_____	_____ (relationship)
_____	_____ (relationship)
_____	_____ (relationship)
_____	_____ (relationship)

Both Parents to sign please.

Signed: _____ Parent/Guardian Signature
 _____ (Please print name) Date: _____

Signed: _____ Parent/Guardian Signature
 _____ (Please print name) Date: _____