

**ELEMENTARY LUNCH RELEASE PERMISSION SLIP
2018-2019**

PLEASE COMPLETE ONE FORM PER CHILD.

STUDENT'S NAME: _____
(PRINT)

GRADE/TEACHER: _____
(PRINT)

PLEASE MARK THE SPACE BELOW INDICATING YOUR PARENTAL DECISION.

_____ MY CHILD **HAS** PERMISSION TO HAVE LUNCH WITH A FRIEND AND THEIR ADULT RELATIVE ON THE PATIO.

_____ MY CHILD **DOES NOT** HAVE PERMISSION TO HAVE LUNCH WITH A FRIEND AND THEIR ADULT RELATIVE ON THE PATIO.

PARENT SIGNATURE _____ DATE _____

*ANY RELATIVE COMING FOR LUNCH MUST BE IN RENWEB.

*DUE TO ALLERGIES, NO FOOD OR DRINK ARE PERMITTED FOR FRIENDS (BROUGHT OR PURCHASED).

**PARENTAL INFORMATION RELEASE FORM
2018-2019**

MUST CHOOSE ONE OF THE TWO OPTIONS AND SIGN BELOW

_____ I GIVE THE KING'S ACADEMY PERMISSION TO RELEASE INFORMATION ABOUT MY NAME, OR CHILD'S NAME, HOME PHONE NUMBER, AND ADDRESS TO OTHER TKA PARENTS IN OUR SCHOOL FOR **SCHOOL-RELATED** ACTIVITIES ONLY.

_____ I DO NOT WANT THE KING'S ACADEMY TO RELEASE ANY INFORMATION ABOUT MY CHILD OR OTHER PERSONAL INFORMATION.

PLEASE PRINT THE INFORMATION BELOW
(ONE PER CHILD)

CHILD'S NAME _____ GRADE/CLASS _____

ADDRESS _____ CITY _____ STATE & ZIP CODE _____

(_____) _____
HOME PHONE

(_____) _____
CELL PHONE

PARENT/GUARDIAN'S SIGNATURE _____ DATE _____