

MEDIA RELEASE

Child Name

Father email

Mother email

I hereby grant St. James' Christian Academy my permission to use any picture taken of my child for school publicity including but not limited to school flyers, brochures, murals, web page, and any other media form available.

Child Name

Parent Name

TRANSFER OF RECORDS

I hereby grant St. James' Christian Academy my permission to obtain any and all of my child's former school records.

CHILD NAME

FORMER SCHOOL NAME

PARENT SIGNATURE