



## Parental Consent/Involvement/Cleaning

### CONSENT:

Please write yes or no for each of the following:

- \_\_\_\_\_ School staff may administer non-aspirin (please bring from home).  
\_\_\_\_\_ I grant permission for my child to go on walking field trips.  
\_\_\_\_\_ I grant permission for the school to use pictures of my child(ren) in school publications (promotional and/or social media)  
\_\_\_\_\_ I grant permission to list my contact information in the school directory.  
\_\_\_\_\_ I grant permission for my student to ride with other parents who are properly insured and licensed on school field trips.  
\_\_\_\_\_ Extracurricular activities

### PARENTAL INVOLVEMENT:

Our school relies heavily on parent volunteers and parent involvement. Please check the areas in which you would be willing to serve:

- Listen to children read aloud
- Help with classroom parties/special events
- Driving for field trips (must supply proof of insurance and valid driver's license)
- Assist with art projects
- Help with musical/play
- Help with extra-curricular sporting events
- Shelving library books
- Other \_\_\_\_\_

### SCHOOL CLEANING:

- I understand that in order to keep our costs down, our school relies on parents to perform regular cleaning duties of our facilities (Mainly wiping down classroom surfaces, mopping floors, and vacuuming). I am willing to clean the school 2-3 times a year.

OR

- I am unable to perform these cleaning duties as stated above. I am willing to pay \$175 to cover the costs to have a cleaning service come to clean in my place for the year.

Please print your child(ren)'s name on lines below who attend Trinity Lutheran School.

\_\_\_\_\_  
\_\_\_\_\_

*\*\*\*By signing below, you indicate your consent to the above statements.*

Parent Name \_\_\_\_\_ (please print)

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date