

## Congregation Rodef Shalom

### Passport to Jewish Learning Parent Release Form

Student 1 Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student 2 Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student 3 Name: \_\_\_\_\_ Grade: \_\_\_\_\_

### All Inclusive Parent Release Form

#### Emergency Release

In the event of an emergency, I hereby give permission to Congregation Rodef Shalom or its agent to hospitalize and/or secure proper treatment for my child(ren) as named in this release form.

#### Field Trip Release

I authorize my child(ren) (listed above) to leave Congregation Rodef Shalom for Field Trips with adequate supervision and advanced notice.

#### Photo and/or Video Release Authorization Form

Photos and/or videos will be taken of students, student activities, etc. Student names will not be used without a separate, signed release.

I authorize the use of photos and videos of my child(ren) (listed above) for but not limited to: news releases, the synagogue website, Facebook, school-related video and slide presentations, marketing purposes, etc.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_