



2023-2024 School year

Family information

1-Student full name _____
 Student Birthdate Month_____ Day_____ Year_____

2-Student full name _____
 Student Birthdate Month_____ Day_____ Year_____

3-Student full name _____
 Student Birthdate Month_____ Day_____ Year_____

Family Address _____

Mother's Name _____
 Mother's Email _____
 Mother's Phone _____
 Church _____ SDA? _____

Father's Name _____
 Father's Email _____
 Father's Phone _____
 Church _____ SDA? _____

Permission to give occasional over-the-counter medication

Check next to medications you give permission for EPAA to administer at school and initial at the bottom of this section.

_____ Hydrocortisone cream	_____ Ibuprofen
_____ Benadryl spray or gel	_____ Acetaminophen
_____ Neosporin	_____ Antacid
_____ Eye drops	

Initials of Parent or guardian _____

Photo/Video Release

EPAA and Florida Conference use individual and group photos and videos of your children in publications such as:

- Website
- Yearbook
- Marketing tools
- Newsletters
- Social Media

Please initial below indicating that you give us permission to use photos and or videos of children listed above for these publications.

Initials of parent or guardian _____

Internet usage agreement

Parent or Guardian:

I understand that the internet can provide students with valuable learning experiences through access to computers around the world, but that the school cannot control what is on these computers. I accept that, while teachers will be watchful of what students are doing online, protection against exposure to harmful information must depend upon responsible use by my student. **Please discuss appropriate use with your student.**

I believe _____ (name of student or students) understands this responsibility, and I am hereby giving my permission for him/her to access the internet under school rules. I understand that students believed to have broken these rules will be subject to appropriate action by the school. Any activity not in compliance with these rules may result in a loss of computer and internet access as well as other disciplinary or legal action.

Initials of Parent or guardian _____

*Please note that students in grade 3-8 will be signing their own internet usage agreement in the first week of school.

List of individuals (besides parents) authorized to pick up student(s)

_____	_____
_____	_____

I hereby acknowledge that I have fully read and completed the above information:

Parent/Guardian's Signature: _____ Date: _____