



**St. Joseph Catholic School  
2 N. Alton St. Freeburg, IL**

*Formal Agreement*

**INTERNET/COMPUTER USE:**

The computer use agreement verifies that a student must comply with all school policies. In particular, it is to be understood that: any use of computers at school is for educational purposes; that there is no privacy in regards to computer files(administration may search at any time); that students must never give their password to anyone else and are responsible for anything done under their login session, and that students may never use a computer for any reason that would be contrary to Catholic values, injurious to another person, or for any type of malicious, violent, or sexual purpose. The full agreement may be obtained from the school office.

Parent Initials \_\_\_\_\_

**PUBLICITY RELEASE:**

I hereby expressly grant to St. Joseph Catholic School, the St. Joseph Catholic Church and/or the Diocese of Belleville the right, privilege and license to use my child(ren)'s picture, likeness, or voice in any photograph, movie, video production or any other forms of media production and to use the child's verbal or written statements or declarations for the purpose of publicizing, fostering and promoting St. Joseph Catholic School and its programs or for any other purpose in furtherance of the mission statement of St. Joseph Catholic School.

Parent Initials \_\_\_\_\_

**HANDBOOK REVIEW:**

Each family receives a school handbook and calendar. It is each family's obligation to review and comply with the policies therein. I hereby express that I have received a copy of and have read the policies outlined in the Parent-Student Handbook.

Parent Initials \_\_\_\_\_

**WALKING FIELD TRIPS:**

I hereby express permission for my child(ren) to partake in field trips found within walking distance of St. Joseph Catholic School. All activities take place under the supervision of St. Joseph Catholic School employees. I consent to my child(ren)'s participation and accept responsibility for any loss or damages to property, injury to my child(ren) or others whether by accident or intent, and remain fully responsible for any legal responsibility or payment of all expenses associated from any personal actions taken by said child(ren).

Parent Initials \_\_\_\_\_

**LOAN OF TEXTBOOKS: (K-8)**

I hereby request the loan of secular textbooks in accordance with Public Act 79-961 of 1975 for my child(ren) attending St. Joseph Catholic School.

Parent Initials \_\_\_\_\_

**MEDICAL CONSENT:**

We, as parents or legal guardians of our children do hereby certify to St. Joseph Catholic School and the Catholic Diocese of Belleville the following:

Student: \_\_\_\_\_

Student: \_\_\_\_\_

Student: \_\_\_\_\_

Allergies/Medical Conditions:  
\_\_\_\_\_  
\_\_\_\_\_

*(You may use the backside if room is needed)*

Student(s) are covered by medical insurance?  
\_\_\_\_yes \_\_\_\_no

Insurance Company: \_\_\_\_\_

Policy / Group Number: \_\_\_\_\_

I/we will assume all responsibility for payment of any medical expenses incurred by the child due to injury or illness that occurs while the child is in attendance at the school, or participating in any school-sponsored activity, including athletic events.

I/we hereby agree to hold harmless and indemnify St. Joseph Catholic School and the Diocese, including their employees, volunteers, clergy and religious, from any claims for medical expenses described above.

**SIGNATURES OF AGREEMENT**

I/We acknowledge that I/we have read and agree to all terms set forth in this agreement.

**Please sign and Date:** \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

**Please sign:**

Student 1: \_\_\_\_\_

Student 2: \_\_\_\_\_

Student 3: \_\_\_\_\_

Student 4: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_