

# Vinings Academy

## Information Release for School Directory

I authorize the release of the below information for publishing in the school directory.

Child's Name \_\_\_\_\_ BirthDate \_\_\_\_\_

Parent Name(s) \_\_\_\_\_

Home Phone \_\_\_\_\_

\_\_\_\_\_ 's Cell \_\_\_\_\_

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

Home Address \_\_\_\_\_

\_\_\_\_\_

Other Siblings & ages \_\_\_\_\_

\_\_\_\_\_ I do not want to have my family in the school Directory

I promise not to use the information in this directory for any commercial purposes or to pass this information on to any person or business not associated with the school without first contacting the person or people involved and receiving their permission.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date