



**HOLY NAME  
of MARY**  
CATHOLIC SCHOOL



**Holy Name of Mary Catholic School**  
Box 789, 110 Paterson Street  
Almonte, ON K0A 1A0  
Tel 613-256-2532 | Fax 613-256-0899

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Homeroom: \_\_\_\_\_

**PERMISSION FOR EDUCATIONAL TOURS (WALKING)**

My child may go on supervised walking Educational Tours off school property (i.e. Holy Name of Mary Parish, Town Hall, etc.) during the 2019 - 2020 school year

YES

NO

**PERMISSION FOR PHOTOGRAPHS**

I give permission for \_\_\_\_\_'s name, school work and/or picture to be show in:

- School-related publications
- Television
- School/Board website
- Newspaper

Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_