



PARISH HILL MIDDLE/HIGH SCHOOL

REGIONAL SCHOOL DISTRICT #11
Chaplin, Hampton, Scotland
304 Parish Hill Road, Chaplin, Connecticut 06235
Phone (860) 455-9584 / Fax (860) 455-9081



www.parishhill.org

Home of the Pirates

Problem Solver, **I**ndependent, **R**espectful & Responsible, **A**cademic Achiever, **T**echnologically Proficient, **E**ffective Communicator
Brian Tedeschi, Principal **Thomas McKenna, Assistant Principal**

Today's Date: _____

Student (s) Printed Name(s): _____

Printed Name of Parent / Guardian of PHMHS Student(s): _____

HANDBOOK ACKNOWLEDGEMENT

Policies are often modified from year to year and new ones added to reflect changes in local Board of Education policy or Connecticut State Statues.

I/We have received and read / understand the contents of this handbook and agree by the Parent/Student Handbook and all of the Regional School District #11 Board of Education Policies.

Signature of Parent / Guardian of PHMHS Student(s): _____

Signature of PHMHS Student(s): _____

VIDEO/PHOTOGRAPH RELEASE

I hereby grant Parish Hill Middle High School (PHMHS) the irrevocable right and permission to use photographs and/or video recordings of my student on the PHMHS and other websites and/or in publications, promotional flyers, educational materials, or for any other similar purpose.

I understand and agree that such photographs and/or video recordings of my student may be placed on the Internet and on PHMHS local Charter Cable Channel. I also understand and agree that my student may be identified by name and/or title in printed, Internet or broadcast information that might accompany the photographs and/or video recordings of me. I waive the right to approve the final product. I agree that all such portraits, pictures, photographs, video and audio recordings, and any reproductions thereof, and all plates, negatives, recording tape and digital files are and shall remain the property of PHMHS.

I hereby release, acquit and forever discharge Parish Hill Middle High School, its current and former trustees, agents, officers and employees of the above-named entities from any and all claims, demands, rights, promises, damages and liabilities arising out of or in connection with the use or distribution of said photographs and/or video recordings, including but not limited to any claims for invasion of privacy, appropriation of likeness or defamation.

I agree

I do not agree

Signature of Parent / Guardian of PHMHS Student(s): _____

PREFERRED CONTACT METHOD FOR BLACKBOARD CONNECT

Parent/Guardian (Mom): Home – Voice Only Cell – Voice Cell - Text Email

Parent/Guardian (Dad): Home – Voice Only Cell – Voice Cell - Text Email

**Please return this form – signed by student and parent/guardian -
return to Assistant Principal's Office
by Friday, September 2, 2022.**