



TeSTY Permission Slip and Publicity Release Form

School Year 2009 - 2010

Family Name

Member Name(s)

TeSTY Permission Slip for Field Trips

My child(ren) listed above has permission to participate in all TeSTY activities during the 2009-2010 school year. I understand that I will be notified of all planned activities.

In the event that my child(ren) is injured while at a TeSTY event and reasonable efforts to locate me fail, I authorize the Youth Group Advisor, or other representative of the Temple to authorize emergency medical care for the above named child.

Parent's Signature

Date

Publicity Release

Temple Sinai Temple Youth is proud of our youth group and we enjoy highlighting their accomplishments. We do this through articles and advertising in local newspapers and the **Shofar**, as well as photo displays. This could also include work on our Web Site. We would like permission to use photographs of your child(ren) in the mentioned media. Please check one of the statements below and return this form to school.

- I give Temple Sinai Temple Youth permission to publish photographs of my child for use in any news media (newsletters, newspapers, Web Site, advertisements, etc.) during the 2009 - 2010 school year. **Names will not be used on the Internet.**
- I DO NOT give Temple Sinai Temple Youth permission to publish photographs of my child for use in any news media (newsletters, newspapers, Web Site, advertisements, etc.) during the 2009 - 2010 school year.

Parent's Signature

Date