

École Primaire

East Hill

Elementary School

10350 Bd Perras, Montréal, QC H1C 2H1

AUTHORIZATION FORM 2025-26

Student's Name _____

Grade: _____

MILK PROGRAM PARTICIPATION AUTHORIZATION

Yes, I would like my child to receive milk at school.

No, I do not want my child to receive milk at school.

COMMUNITY OUTINGS PARTICIPATION AUTHORIZATION

During the course of the year, teachers may take the class on short visits in the community, to the park or on a walk in the community related to a specific project.

Your permission now, will avoid numerous letters later. For all trips requiring bus transportation, individual authorisation letter will be sent home.

I authorize the school to take my child on community outings.

I do not authorize the school to take my child on community outings.

Parent Signature

Date

