



Western Alamance High School
**Parent Permission for
Classroom Video Showing**

Warriors Expect Respect!
“Leading By Example”

**Students should fill out the bottom of this form
Return the entire form to your instructor**

Date: _____

Dear Parent / Guardian:

Your child is currently involved in studying _____

in _____ class with Mr/Mrs/Miss _____.

It is our intention to use excerpts from the videotape entitled _____.

in your child’s class on the following date _____.

This particular resource is being used because it _____

This film is rated _____.

Principal’s Signature _____

**Students and Parents must fill out the information below
****Return this entire form to your instructor******

Student’s Name (Please Print) _____

Please check either A or B:

_____ (A) I give permission for my child to view the above videotape in this class.

_____ (B) I do not give my permission for my child to view the videotape and I request that my child be given an alternative assignment.

Name of Parent / Guardian (Please Print) _____

Signature of Parent / Guardian _____

If this form is not received by _____, your child will receive an alternative assignment.