

## TECHNOLOGY AGREEMENT

I have read the Technology Use Policy found online at [www.holycrossama.org](http://www.holycrossama.org) and agree to the conditions of use as set forth in this policy.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Student Signature

## MEDIA INFORMATION

Throughout the school year, HCCA sends press releases to local media outlets about various activities, competitions, etc. Please indicate below whether or not you give permission for HCCA to use your child's picture, name, voice, or image in these press releases, on the HCCA website, or in HCCA videos.

\_\_\_\_\_ I DO give permission for my child's picture, name, voice, or image to be used in HCCA press releases, videos, or on the HCCA website.

\_\_\_\_\_ I DO NOT give permission for my child's picture, name, voice, or image to be used in HCCA press releases, videos, or on the HCCA website.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

## STUDENT DIRECTORY INFORMATION

Holy Cross Catholic Academy publishes a student directory. The Right to Privacy Act requires that Holy Cross notify parents and guardians that their names, the student's name, address, zip code, and telephone number will be published in the directory. Please indicate below whether you do, or do not want the following information in the student directory.

\_\_\_\_\_ I DO give permission to Holy Cross Catholic Academy to publish all of the above information in the student directory.

\_\_\_\_\_ I DO NOT give permission to Holy Cross Catholic Academy to publish all of the above information in the student directory.

Please indicate the primary phone number you would like published in the directory: \_\_\_\_\_

Please indicate the primary email address you would like published in the directory: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Grade