

**Receipt of Parent Handbook Form
Movie Permission Form
Picture Release Form**

Please print and complete the information below and return this form to the CASP office. The form can be faxed to 573-3512, mailed or hand delivered to 1023 N. Flood, Norman, OK 73069.

CASP Parent Handbook Receipt

I have received the link to download a copy of the CASP parent handbook and recognize that it is my responsibility to familiarize myself and my child with the policies and procedures it contains. By my signature, my child(ren) and I agree to abide by the policies and procedures outlined in the parent handbook.

CHILD'S NAME _____

SCHOOL _____

PARENT'S NAME _____

PARENT'S SIGNATURE _____ DATE _____

CASP Movie Release

I agree to allow my child to watch CASP owned G and PG rated movies. A complete list of movies is available at the CASP office.

PARENT'S SIGNATURE _____ DATE _____

CASP Picture Release

I will allow my child's picture be taken for CASP promotional purposes only. This includes pictures with a camera and/or video recorder. Equipment used for this purpose will be owned by CASP. I understand that these pictures may be included but not limited to advertising literature and/or the CASP web site.

PARENT'S SIGNATURE _____ DATE _____