

# LILLARD FLY FISHING

EXPEDITIONS

Students Name: \_\_\_\_\_

## SCHOOL REFERENCE

**INSTRUCTIONS TO PARENTS:** Complete the top part of this form. Give your child's school the signed form. Please ask the school to complete the bottom part of this form and return it directly to Lillard Fly Fishing Expeditions via email or mail.

Please note: Although the final due date for this form is May 1st, it is beneficial to you to turn it in earlier. As soon as we receive and review this form along with the Health Record form, we will either notify you that your acceptance is confirmed and that you may purchase a flight, or we will call you with any questions.

### **AUTHORIZATION TO RELEASE INFORMATION & WAIVER OF RIGHT TO ACCESS**

I hereby authorize (insert name of school) \_\_\_\_\_ to disclose to Lillard Fly Fishing Expeditions (LFFE) the information requested below and, if requested by LFFE, my child's school record, including but not limited to: an unofficial transcript, a complete record of detentions, suspensions, expulsions, adjudications and discipline-related actions from the school listed above and any other school, institution or governmental authority that may be part of my child's school record. I hereby further authorize a representative of the school listed above to describe below and to discuss with LFFE directors, my child's character, social skills and mental and physical health. The school listed above and any employees, officers and facilities associated with it are hereby released from any legal responsibility or liability for disclosure of my child's school records and related information to the extent indicated and authorized herein. I understand this authorization may be revoked at any time by writing to the person or entity I authorized to release this information, except to the extent that disclosure made in good faith has already occurred in reliance on this authorization. I give permission to photocopy this form. I waive my right to access (under the Family Educational Rights and Privacy Act, FERPA), and I understand that I will never see this completed form or any other supporting materials submitted to LFFE on my child's behalf.

STUDENT'S NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

**INSTRUCTIONS TO THE SCHOOL:** Thank you for completing and returning this form to Lillard Fly Fishing Expeditions as soon as possible.

### SCHOOL ENROLLMENT INFORMATION & DISCIPLINE RECORD

1. How long has this student attended your school?
  2. Has this student ever received a detention or similar action from your school? YES NO
  3. Has this student ever been suspended or expelled from your school? YES NO
  4. Has this student ever been suspended or expelled from another school? YES NO
- Please provide additional information for any YES answer for the above questions on an additional sheet.

### SIGNATURE & CONTACT INFORMATION

SCHOOL OFFICIAL SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_ POSITION/TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SCHOOL NAME & ADDRESS

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