

**Notification and Consent Form for District Employee/Student Text Messaging  
for Designated Activity**

This form provides you with written notice of the District's intent to use text messaging with your child. Parental/guardian permission must be obtained, in writing, in order for a District employee to communicate with your child via text messaging.

**Student Name:** \_\_\_\_\_

**School:** \_\_\_\_\_

**Designated Activity (Extra-curricular Activity/Club/Sport/Field Trip):**  
\_\_\_\_\_ Conestoga Rugby Team \_\_\_\_\_  
\_\_\_\_\_

**Expected Dates of Communication:** January 16th through July 1st \_\_\_\_\_

*Check as many as are applicable*

\_\_\_\_\_ I give my permission for my child's cell phone number to be shared with and used by the following District employees in connection with the Designated Activity:

District employees:

1. Alexander Johnson (HS Boys) \_\_\_\_\_
2. Pat Humbert (Juniors) \_\_\_\_\_
3. Steve Bugh (HS Girls) \_\_\_\_\_
4. \_\_\_\_\_

\_\_\_\_\_ I give my permission for my child's cell phone number to be shared with other students and District employees who are associated with the group-related activity.

**Name of Parent or Guardian:** \_\_\_\_\_  
(please print)

**Signature of Parent or Guardian:** \_\_\_\_\_

**Student's cell phone number:** \_\_\_\_\_

**Date:** \_\_\_\_\_