

Information Release

As of January 2004, the Personal Information Protection Act (PIPA) came into effect within the Province of BC. PIPA regulates the collection, use and disclosure of private information such as names, addresses, phone numbers (home and work), email addresses, birth dates, PEN numbers, legal guardianship, court orders, behavioral academic and health information, report cards and transcript, emergency contact information, doctors name and phone number, health insurance number, and any other information needed by private organizations that applies to our school.

OKAA is required to share this pertinent information with Government, Educational and Health Agencies (ie: Interior Health Authority- IHA) and the British Columbia Conference Office of Education.

I, _____ hereby give my permission for OKAA to use and disclose this personal
(Please print your name- Parent/Guardian)

information/data (as stated above) to Government and Educational Agencies and representatives of Interior Health Authority (IHA) for educational and health purposes.

I give further permission to Okanagan Adventist Academy to use prudently this personal information (as stated above) where necessary to communicate information within the school family.

Signature: _____
Parent/Guardian

Date: _____

General Permission

I _____ understand that throughout the school term 2006/2007
(Please print your name- Parent/Guardian)

my child may be required to leave the school grounds for a school activity. This may require that

_____ be driven by a volunteer parent or teacher to this event.
(Please print your child's name)

I hereby give my permission for by child to participate in the activity and permission for her/him to be driven by a qualified and insured **school approved** driver.

Signature: _____
Parent/Guardian

Date: _____

Computer/Internet Permission

Having read Okanagan Adventist Academy's computer/internet policy, I _____
(Please print your name- Parent/Guardian)
understand that misuse of OKAA computers or Internet tools will result in suspension or permanent loss of telecommunications privileges and possible disciplinary action.

Signature: _____
Student

Date: _____

Signature: _____
Parent/Guardian

Date: _____

Promotional Material Permission

I _____ consent to having photographs, video, work samples, and
(Please print your name- Parent/Guardian)
an other promotional material of my child(ren) used by Okanagan Adventist Academy in the yearbook, news letters and other promotional material for OKAA or the BC Conference Office of Education.

Signature: _____
Parent/Guardian

Date: _____

Directory Permission

I _____ consent to having OKAA prepare a family phone list
(Please print your name- Parent/Guardian)
(phone directory, car pool list, class list, room mom list) for used by families who's children attend OKAA

Signature: _____
Parent/Guardian

Date: _____

This information is required in order to register you child(ren) at Okanagan Adventist Academy and assist us in making an informed decision as to your child's suitability and appropriate placement in our school.