HOPE ACADEMY

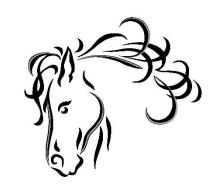
STUDENT PERMISSION FORM



Student Name:	Grade:	
Parent Permission:	Date	
Parent Cell Phone:		
Guest's Name:	Grade:	
Guest's Parent Permission:		
Guest's Parent Cell Phone:		

HOPE ACADEMY

STUDENT PERMISSION FORM



Student Name:	Grade:	
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