



Holy Name School

850 Pearce Street
T: 508-674-9131

Fall River, Massachusetts 02720
F: 508-679-0571 W: hnsfr.org
Mr. David J. Flanagan, Principal
Very Rev. Jay T. Maddock, Director

Date: _____

Cell Phone Permission Form

Name Of Student: _____ Grade: _____

Cell Phone

Number: _____

I hereby give permission for my child to bring a cell phone to school. I understand that the cell phone will be collected in the morning, placed in a locked drawer in Mrs. Chippendale's office during the day, and returned to my child at 2:20 p.m. for dismissal. However, if my child is staying after school for any reason it will be held until my child leaves the premises for the day.

Signature of

Parent/Guardian: _____

Printed Name of

Parent/Guardian: _____