



**Mill Creek Elementary
School
Media Center**

**MEDIA CENTER PERMISSION FORM
2013-2014 School Year**

**Please fill in the following information and return to the media specialist
Mrs. Bergmann.**

Name of Student: _____

Address: _____

Parents e-mail Address: _____

Home Phone: _____

Classroom Teacher: _____

Student's Birthday:(mm/dd/yr)_____

I will be responsible for books and materials which my child checks out from the media center at Mill Creek Elementary School. The student will be charged for damages to books or materials or charged for the replacement cost if the book or material if damaged beyond use or lost.

Parent Signature: _____

Print Name:_____