



Patriot High School Colorguard Fall 2020

I _____ (parent) give permission to my student _____ (student) to use the following apps and technology for Colorguard.

-Instagram (optional)

-Google Drive

-Google Classroom

-Youtube

-Zoom

-Email

-Remind 101

I _____ (student) understand I need the following apps and technology for Colorguard.

-Instagram (optional)

-Google Drive

-Google Classroom

-Youtube

-Zoom

-Email

-Remind 101

Student Name : _____

Parent Name: _____