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 **BROWNSVILLE ACADEMY HIGH SCHOOL**

 **1150 East New York Avenue**

#  Brooklyn, NY 11212

Carol Ying, Principal Telephone: 718-778-7305

Omar Nasr, Assistant Principal Facsimile: 718-778-7385

**Military Opt Out Form**

Dear Parents/Guardians:

This form allows you to opt out of releasing your child’s information, i.e. name, address and telephone number, to military recruiters. You also have the option of allowing this information to be released if you and your child are interested in pursuing a military option. Please check the appropriate box and sign your name. You and your child can change your options at any time during your child’s school career.

Thank you for your cooperation.

Sincerely,

Carol Ying

Principal

**Student’s Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Opt Out Form:**

**Please choose one of the options below:**

**[ ] I WILL NOT ALLOW** my child’s name, address and telephone number to be shared with military recruiters.

**Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Print Name Signature

**[ ]** **I WILL ALLOW** my child’s name, address and telephone number to be shared with military recruiters.

**Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Print Name Signature