



**PALM BEACH  
DAY ACADEMY**

**AUTHORIZATION FORM FOR THE RELEASE OF  
SCHOOL RECORDS & RECOMMENDATIONS**

**ADMISSION OFFICE**  
1901 SOUTH FLAGLER DRIVE, WEST PALM BEACH, FLORIDA 33401  
PHONE 561-832-8815 FAX 561-832-3343

[www.pbday.org](http://www.pbday.org)

**This form should be returned to the Admission Office at the address above.**

**Student:** \_\_\_\_\_ **Present Grade:** \_\_\_\_\_

**This authorizes you to release copies of my child's records to the Admission Office at Palm Beach Day Academy. Please include copies of report cards, the results of any standardized tests you may have administered, and other information / observations which you feel are appropriate.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT OR GUARDIAN

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_

\_\_\_\_\_  
TELEPHONE

\_\_\_\_\_  
FAX

**NONDISCRIMINATION POLICY**

PALM BEACH DAY ACADEMY ADMITS STUDENTS OF ANY RACE, COLOR, RELIGIOUS AFFILIATION, NATIONAL AND ETHNIC ORIGIN TO ALL THE RIGHTS, PRIVILEGES, PROGRAMS, AND ACTIVITIES MADE AVAILABLE TO STUDENTS AT THE SCHOOL.

**LOWER CAMPUS**

1901 SOUTH FLAGLER DRIVE, WEST PALM BEACH, FLORIDA 33401  
PHONE 561-832-8815 FAX 561-832-3343

**UPPER CAMPUS**

241 SEAVIEW AVENUE, PALM BEACH, FLORIDA 33480  
PHONE 561-655-1188 FAX 561-655-5794