

Account Activation and Release of Records Form

Part 1 – Account Activation

Future Bound Miami is a Children's Savings Account (CSA) program providing kindergarten students at participating Miami-Dade County Public Schools (M-DCPS) elementary schools with a free, long-term, deposit-only savings account for their child's college or postsecondary education housed at the Educational Federal Credit Union (EdFed). When you activate your child's account in Kindergarten, the account will receive an initial deposit of up to \$50 automatically. There is no cost for parents or students to activate the account. You can contribute savings into your student's account at your own pace. From time to time, there will be opportunities to earn additional program contributions dollars dependent on available funding.

Only the student may access the account funds upon graduating from an M-DCPS high school, marking the successful completion of the program. At that time, students will also receive their earned program contributions. If a student leaves, M-DCPS prior to completing the program, all non-program contribution dollars deposited during their school career will be returned to the student. However, all program contributions earned through participation in the program will be returned to Future Bound Miami.

After submitting this form to your student's teacher or schools' Future Bound Miami Champion, you will receive a notification via text message and/or email that your students' account has been activated (please allow 2 weeks for account activation). Once you receive this message, you will be able to view your child's account balance in the Future Bound Miami Savings Tracker on the M-DCPS Student Portal. In order to view your student's account balance, you must agree to the Future Bound Miami Savings Tracker Portal Terms & Conditions below:

Please select one of the options below. By selecting "yes" and completing the following form, you are choosing to activate a free Future Bound Miami Children's Savings account for your child.

□ Yes, I would like to activate a free Future Bound Miami Children's Savings Account for my child.

□ No, I would not like to activate a free Future Bound Miami Children's Savings Account for my child.

By signing below, you agree to activate a Future Bound Miami Children's Savings Account

Parent Name Printed:	
Parent Signature:	
Parent Phone Number:	
Student Name:	
Student ID Number:	
School Name:	

(Turn over and complete back side of form)



Part 2 – Permission for Release of Records

Student's Name: _____

Date of Birth: _____

I, ________(Parent Name), hereby grant permission for the release of the below stated records and information to be in effect until the above-named student graduates from high school or consent is withdrawn. The purpose for this release is to participate in the Future Bound Miami Children's Savings Account ("CSA") Program. The following records may be released to Catalyst Miami, Inc. a Florida not for profit corporation whose principal address is 3000 Biscayne Boulevard, Suite 210, Miami, Florida 33137. In addition, Educational Federal Credit Union will have access to the Student's Name, M-DCPS ID# and DOB. Access to this data will ensure that deposits are made to the correct student's account.

Student information: Name, Date of Birth, Home Address; Grade Level; Free and Reduced Lunch Status; School Name; Language, Child
Unique ID Number (FLE ID Number) and Student ID Number (MDCPS).

• Parent information: Names, Email Addresses, Cellular Numbers, Language, and Parent unique ID number.

(Parent Name), also agree to release, acquit, and forever discharge the School Board of Miami-Dade County, Florida, of and from any and all manner of action and actions, cause and causes of action, suits, liability, debts, dues, sums of money, accounts, reckonings, bonds, bills, covenants, contracts, controversies, agreements, promises, variances, trespasses, damages, judgments, executions, claims and demands whatsoever, in law or in equity, which I or my child ever had, now has, or hereafter can, shall or may have, against the School Board of Miami-Dade County, Florida, for, upon or by reason of any matter, cause or thing whatsoever, whether direct or vicarious, arising from or incidental to the transmittal of said information to Catalyst Miami and/or from my child's participation in the CSA program.

Signature of Parent or Eligible Student

(Date)

School/Agency Releasing/Requesting Records

Signature of Authorized Personnel

(Date)

Miami-Dade County Public Schools is subject to the Family Educational Rights and Privacy Act of 1974 Codified at 20 U.S.C. §1232 g. Therefore, all documents contained in a student's educational records, except those specifically waived are accessible to the parents or eligible student.

Title

Personally identifiable information may be transferred to a third party only on the condition that it will not be released to any other parties without obtaining the consent of the parent or eligible student.

A COPY OF THIS AUTHORIZATION SHALL BE AS VALID AS THE ORIGINAL