

Permission Form
Pre-K 2024-2025

Student's Name: _____

Please initial on each line and sign and date at the bottom of the page

_____ **I acknowledge I must provide an up to date shot record, including four-year-old shots, and a physical form completed by a doctor to the Cabot Administrative Office, Pre-k Department in order for my child to attend school. These documents will be turned in by August 1st. Failure to turn in these documents may inhibit student enrollment.**

_____ Free/Reduced lunch information will be provided for me to complete.

_____ **I understand that I am responsible for all meal charges prior to notification of approval by Cabot Schools Food Services.**

_____ **If denied, I understand that I am responsible for all meal charges my child incurs during the school year.**

_____ Our Pre-k students will play outside daily as part of their gross motor time. To prevent overexposure, we will be applying sunscreen as needed. I give the Cabot Pre-K staff my permission to apply sunscreen on my child.

_____ Permission is given for my child to be transported off campus for all school related trips during the 2024-2025 school year.

_____ Cabot Public School Pre-K is asking for your consent to photograph and videotape students while they are engaged in program activities or events. By signing below you are giving your consent in advance for photographs, videotapes, and audiotapes to be made. You are also releasing and discharging Cabot School District from any and all claims arising out of the use of the photography/video of your child.

_____ No religious activity will be paid or subsidized by public funds or occur in any manner suggesting Governmental endorsement of any religion or religious message

Parent Signature

Date