

To accompany the Yellow Emergency Form

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YES \_\_\_\_ NO \_\_\_\_ Our residence has internet access for computer use.

YES \_\_\_\_ NO \_\_\_\_ Is either parent/guardian on active duty in the Armed Forces? (Active Duty is defined as full-time duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard. This also includes Active Full-Time National Guard Duty.) If 'yes', which branch? \_\_\_\_\_

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OPTIONAL - WITHHOLDING OF PERMISSION

\_\_\_\_ I do NOT give permission to share my name, address, phone and email information for a school parent directory, Parent/Teacher Organization or Pacifica Education Foundation use.

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ANNUAL NOTIFICATION AND ACKNOWLEDGEMENT OF DISTRICT POLICIES AND PROCEDURES

I, the undersigned parent/guardian, give my consent for my child to be released to me or my spouse or to the friend/relative I have so designated and/or to be taken by ambulance to the nearest hospital in case of emergency.

I understand that Pacifica School District does not provide accident medical/dental coverage for students for injuries/illnesses occurring at school. I understand that I may voluntarily purchase a student accident insurance plan.

I further acknowledge that I am financially responsible for medical, dental, ambulance, or other health care expenses or transportation of my child home, which might occur as a result of such illness or injury.

I have been provided a copy of the school handbook and Annual Parent Notification / District Handbook.

I have read and understand the school and district's policies on:

Sexual Harassment [BP 51147.7] / Sex Education and Family Life Education / Uniform Complaint Procedures (Due Process) [BP1312.3] / School Records and Achievement / Alternative Schools / Discipline / Health Services for Students / Pesticide Use / Attendance Options / Asbestos Management

Please check box below to acknowledge the following statements.

I agree to receive the 'Annual Notification to Parents' and 'District Handbook' electronically as we move forward. Hard copies can be provided upon request.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Parent/Guardian \_\_\_\_\_