

Special Activity Opt Out Form

If you do not want your child to participate in the special activity, please complete the form below and click submit. This form is not used for opting out of assessments. Please contact Mr. Loi if you have any questions.

* Required

1. Email *

2. Student Last Name *

3. Student First Name *

4. Grade Level *

Mark only one oval.

Kindergarten

1

2

3

4

5

6

7

8

5. Title of Special Activity *

6. By entering your name below, you acknowledge that you want your child to opt out of the special activity listed above. *

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