

**SECTION A** Please complete SECTION A of the Signature Card (please print legibly)

Print Student Name (Last, First) Imprime Nombre del estudiante (Apellido , Nombre)		Address (#, Street Name, City, Zip) Dirección											
<input type="checkbox"/> Male (Nino) <input type="checkbox"/> Female (Nina) <input type="checkbox"/> Non Binary (No binaria/o)													
Please check one Por favor marque una		Home Phone Teléfono de casa		Cell Phone Teléfono celular									
				TK	K	1	2	3	4	5	6	7	8
Print Parent/Guardian #1 Name Imprime nombre del padre o guardián #1		Print Parent/Guardian #2 Name Imprime nombre del padre o guardián #2		Circle grade por favor circulen/grado									
				Green Hills	Lomita Park	Meadows	Spring Valley	Taylor					
Print Parent/Guardian #1 Email Address Imprime correo electrónico de padre o guardián #1		Print Parent/Guardian #2 Email Address Imprime correo electrónico de padre o guardián #2		School student is currently enrolled (please circle) Seleccione la escuela que el estudiante asiste (por favor circulen)									
X		X		Your signature certifies that all information provided on this form is true and accurate. Su firma certifica que toda la información proporcionada en este formulario es cierto y preciso.									
Parent/Guardian #1 Signature Firma de padre o guardián #1		Parent/Guardian #2 Signature Firma de padre o guardián #2											

**SECTION B** Please complete SECTION B of the Signature Card (fields left unchecked in this section will default to a "yes" response)

<input type="checkbox"/> Yes <input type="checkbox"/> No	PTA/PTO/MEF Info Release: I give permission to release my name, my students name and our address, telephone numbers and email address to the Millbrae School District PTA/PTO's, the Millbrae Education Foundation (MEF) and any other organization as authorized by the Millbrae School District Board Policy 5125.1.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Use of Student Image: I give permission for my child's picture to be used for a district publication and on the World Wide Web. (inclusive of the annual yearbook)
<input type="checkbox"/> Yes <input type="checkbox"/> No	First Name/Initials Use: I give permission for my child's first and last initials or first name (if it is a common name) and last initial to be used in any student, school, or district publication and on the World Wide Web.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Internet Authorization: I give permission for my child to have direct access to the Internet with staff supervision.
<input type="checkbox"/> Yes <input type="checkbox"/> No	My student has access to the internet at home.
<input type="checkbox"/> Yes <input type="checkbox"/> No	My student has exclusive access to a device at home with camera capability (computer/tablet/laptop etc.)

**SECTION C** Please view each form on our website at <https://www.millbraeschooldistrict.org/domain/50> and sign to acknowledge each notice.

<b>FORM #1 NOTICE TO PARENTS OF RIGHTS AND RESPONSIBILITIES</b>	
X _____ Parent/Guardian Signature	_____ Date
OBJECTION ONLY: I OBJECT TO THE FOLLOWING ITEMS OF FORM # 1, NOTICE TO PARENTS OF RIGHTS AND RESPONSIBILITIES:	
_____	
X _____ Parent/Guardian Signature	_____ Date
<b>FORM #2 STUDENT ATTENDANCE AGREEMENT</b>	
X _____ Parent/Guardian Signature	_____ Date
<b>FORM #3 STUDENT USE OF TECHNOLOGY - ACCEPTABLE USE AGREEMENT</b>	
X _____ Parent/Guardian Signature	_____ Date
<b>FORM #4 CHROMEBOOK AND GOOGLE APPS FOR EDUCATION ACCOUNT - ACCEPTABLE USE POLICY</b>	
X _____ Parent/Guardian Signature	_____ Date

FORM #5 STUDENT ACCIDENT INSURANCE

Please check one of the following:

- Yes, I am enrolling my student in the voluntary student health insurance program. I understand a fee is required.
- No, I am not enrolling my student in the voluntary student health insurance program.

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

FORM #6 STUDENT DRESS CODE

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

X \_\_\_\_\_  
 Student Signature Date

FORM #7 SCHOOL SAFETY - STUDENT CONDUCT

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

FORM #8 DISTRICT & SCHOOL EMERGENCY PROCEDURES

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

FORM #9 UNIFORM COMPLAINT PROCEDURES

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

FORM #10 ANNUAL PESTICIDE NOTIFICATION

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

FORM #11 VOLUNTEER CLEARANCE/PARENT DRIVER AND FINGERPRINT/LIVESCAN INFORMATION

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

FORM #12 INTEGRATED PEST MANAGEMENT PLAN

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

FORM #13 INTERNET SAFETY

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

2021-2022 Millbrae Elementary School District Calendar

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

**Taylor Middle School Students Only**  
BULLDOG CODE OF CONDUCT

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

X \_\_\_\_\_  
 Student Signature Date