



Excelsior Springs School District

On August 21, 2017, for the first time since 1918, a solar eclipse will be visible on a path across the United States. Our district will be in the path of totality for the solar eclipse. We are planning to make this once in a lifetime event a unique learning experience for our students.

On August 21, 2017, all district students (with your permission indicated below) will be allowed to go outside in activities and view the period of totality. Classroom teachers will be providing additional details regarding viewing location for their particular class as the event approaches. A sack lunch will be provided that day for students if they are not bringing their own from home and it will need to be indicated on this form. If parents need a sack lunch, please indicate on the form below, too. Students will begin picking up sack lunches from the cafeteria at 12:00 and proceed outdoors with their class. Parents are welcome to join their child at this time.

As always, student safety is our top concern. Looking directly at the sun is unsafe. The only safe way to look at the eclipsed or partially eclipsed sun is through special-purpose solar filters, such as "eclipse glasses". Per NASA, homemade filters or ordinary sunglasses, even very dark ones, are not safe for looking at the sun. The district has purchased and will provide all students who attend the outdoor activities eclipse glasses to wear during this event. Although there is no way to fully guarantee student safety during such a rare event, we will take precautionary measures including pre-education to make students aware of the risks involved in directly looking at the sun. **At no time, should students or other participants remove their eclipse glasses and look directly at the sun as it could cause permanent eye damage or other unknown effects. There is no way for the school to guarantee that your child will not remove their eclipse glasses, so speak with your child about the importance of keeping their eclipse glasses on at all times during this event.**

*If you want your child to participate in outdoor viewing activities planned on August 21st, please review, sign, and return this form as soon as possible. If you do not wish for your child to be outside during this event or if you do not return this form, alternative activities will be held inside during this period. **By signing this permission slip, you as an adult student or parent of a minor child, are acknowledging that you are aware of the risks associated with this event, are freely assuming those risks, and waive the right to pursue any and all claims against the district, its agents, and employees Board of Education members, insurers, and others acting on the district's behalf (collectively, "Releases"), of and from any and all claims, demands, causes of action and/or legal liabilities for eye injury, property damage, injuries to or death of me/my son/daughter occurring during, or resulting from the Solar Eclipse Viewing, even if the cause, damages or injuries are alleged to be the fault of negligence or carelessness of the releases.**

Consent and Release

Student Name: _____ Teacher: _____ Grade: _____

I, parent/guardian of _____, hereby give consent for my son/daughter/me to participate in outdoor Solar Eclipse Viewing activities to view the eclipse on August 21, 2017.

Parent signature

My child needs a sack lunch from the cafeteria. ____

My child does not need a sack lunch from the cafeteria. ____

of parents attending the solar eclipse celebration 12:00-1:30 ____

of sack lunches for parents attending (\$2.95 each, payable in cafeteria on 8.21.17) ____