



2025-2026 School Year

Dear Parents/Guardians:

Re: Custody Orders

In order for the personnel at Warren Glen Academy to provide you and your child with the proper custody release, it is necessary for us to know if your child is covered by a custody order. Please complete the information below and provide us with a copy of the Custody Order so that we will have a clear understanding of the way you would like Warren Glen Academy to handle your individual situation.

Please be advised, without a copy of a specific custody order on file, we cannot prevent a parent from removing a child from school.

Thank you for your assistance in this matter.

Sincerely,

Ms. Fran Corl
Executive Director

This will verify that I have exclusive custody of: _____

___ Yes, I am forwarding a copy for your records.

___ A copy was previously provided for your records.

___ No Restrictions on whom may be in contact.

Additional Note: _____

Parent/Legal Guardian

Date



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PHYSICAL EDUCATION PERMISSION FORM

Part of the Warren Glen Academy Physical Education Philosophy is to have all our students participate in activities that they will enjoy throughout their lives. Consequently, our Physical Education Curriculum includes activities other than team sports. Below is a list of the various activities your child may participate in. Please check each item that your child has permission to participate in.

- Ride a bike
- Skateboard
- Ride a scooter
- Roller blades/roller skates
- Sleigh riding in winter
- Snow board (recreational/play)

Please also understand that when your child is participating in such an activity, they will always be wearing the proper equipment. Helmets, elbow pads, goggles must be worn for some of these sports. The protective equipment is available for students at school, but they are welcome to bring their own.

Child's Name

Parent/Guardian Signature

Date



Please return this form to the school.

TECHNOLOGY USE FORM

2025-2026 SCHOOL YEAR

Parent/Guardian Consent

I have read and understood the **Acceptable use of Technology Policy** for Warren Glen Academy. I also have discussed with my child the implications and penalties involved if this policy is violated and have witnessed my child signing the **Student Agreement** below. I also understand that the school's technology is for educational purposes only and that Warren Glen has taken reasonable steps to safeguard access for users. However, I understand that it is not possible to stop all inappropriate activities and I will not hold the school responsible for any materials obtained through the use of the networks.

I give my child permission to use all the technological resources that Warren Glen has to offer.

Parent/Guardian Name: _____ **Date:** _____

Parent/Guardian Signature: _____

Student Agreement

I have read, discussed with my parent/guardian, and understand the **Acceptable Use Technology Policy** for Warren Glen Academy. I agree to follow these regulations at all times while using the technology provided by Warren Glen Academy. I also understand that a violation of this policy may result in the revocation of my technological privileges and disciplinary action by the school or appropriate legal action if laws are violated. I also understand my parents/guardians will be financially responsible for any damage I cause by the misuse of technology. As a student of Warren Glen Academy, I also agree to report any inappropriate activity to the supervising staff member.

Student User's Name: _____ **Date:** _____

Student User's Signature: _____



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FIELD TRIP CONSENT FORM

My son/daughter _____, is hereby granted permission to take field trips off the school grounds that are part of the activities of the Warren Glen Extended Year (Summer) Program and our regular School Year Program. I understand that a description of each trip, including any special requirements, will be sent home with my child before the trip. Furthermore, I understand that these activities will involve walking, swimming, or riding on a school vehicle or a contracted school bus.

It is also my understanding that every precaution will be taken for the safety of my child. In addition, I understand that proper supervision will be provided by the program. Therefore, my child may take the field trip and the school, Board of Trustees, and members of the staff are hereby released from any obligation in the event of injury to my child occurring as a result of participation in a field trip activity.

I give my son/daughter permission to attend events off school grounds.

Parent/Guardian Signature

Date

I give my son/daughter permission to ride in a school van/vehicle.

Parent/Guardian Signature

Date

**I give my son/daughter permission to swim when attending water events.
I understand that these events will have qualified lifeguards at all times.**

Parent/Guardian Signature

Date



Reward Field Trip Permission Form 2025-2026 School Year

Throughout the course of the year students will be rewarded for academic performance and good behavior as part of our Behavior Modification Program. That reward will come in the form of unscheduled local field trips, i.e. Local Park, McDonald's, pizza, Rita's, Jimmy's. This is to surprise students, to motivate them to continue to perform at a high level. Trips may arise at the last minute; therefore, there may not be time to notify parents prior to the trip. By giving your consent you agree that it is not necessary to notify you prior to the trip. If you would like your child to be able to participate on such field trips, please sign and return this form immediately.

_____ I give my child, _____, permission to participate in the reward field trips.

_____ I do not give my child, _____, permission to participate in the reward field trips.

Parent/Guardian Signature

Date



**WARREN GLEN
ACADEMY**

**Movie Permission Form
2025-2026 School Year**

As part of our program, we have planned several trips to the local movie theater. Some of the films shown have a PG – 13 or a PG rating. Therefore, we need your permission for your child to view a movie with this rating. Please return the form below as soon as possible.

I hereby give my permission for my child, _____, to accompany the summer program staff to a movie that may have **PG rating.**

Signature of Parent/Guardian

Date

I hereby give my permission for my child, _____, to accompany the summer program staff to a movie that may have a **PG – 13 rating.**

Signature of Parent/Guardian

Date



There will be sunscreen and insect repellent available for your child to use during outdoor activities at school and on field trips. Please sign below to consent to the following to be used for your child:

COPPERTONE ULTRA GUARD SPF 50 (clear spray, no rub) or equivalent if above is not available.

I give permission for my child to use the above sunscreen.

Name of Child _____

Parent/Guardian Signature: _____ Date _____

Off insect repellent spray or equivalent if above is not available.

I give permission for my child to use the above insect repellent.

Name of Child _____

Parent/Guardian Signature: _____ Date _____