

**REGISTRATION FOR NOTIFICATION OF
PESTICIDE APPLICATION ON SCHOOL GROUNDS**

The occasional use of pesticides may occur during the school year. This form serves as a way to communicate this to the parents at registration time.

There are three choices for this registration. Please read them carefully. If you check blank # 1, simply sign and return this form. If you select # 2 or # 3, you will need to complete SECTION A below.

Place a checkmark in the appropriate blank, select only one:

1. No need to notify me each time pesticides have to be sprayed.

Signature

Date

2. Only send me notification when you will be applying pesticides to the school grounds while school is in session. COMPLETE SECTION A

3. Yes, please send me by first class mail the date(s) that you will be applying pesticides to the school grounds any time of the year. COMPLETE SECTION A

SECTION A

If you elected to have notification sent to you, then you MUST complete this section.

Printed name of person to be notified

Signature / Date

Name of the student(s)

Grade

Complete address of the person to be notified

Failure to complete this form may have an effect on your rights.