

Bethel-Tate Gifted STEM Program Acceptance of Service and Permission Form 2025-2026

Student Name:	Date of Birth:	Grade Level:
Primary Parent/Guardian Name:		
Email:		
Phone Number:		
Parent/Guardian Name:		
Email:		
Phone Number:		
Does this student have dietary restrictions? NoYes	s - Please explain:	
Does this student have activity restrictions? No Yes	s – Please explain:	
Is this student taking medication of which I need to be aware?	No Yes – Please explain:	
Is your child on the Bethel-Tate Social Media Exclusion List? _	No Yes	
Is there a custody arrangement of which we need to be aware?	No Yes – Please explain:	
Does your child have a current Individualized Education Plan (Il aware?NoYes – Please explain:	EP), 504 plan, or other special accommodati	ons of which I need to be
Is there anything else you would like to communicate to me reg	arding your child? (Continue on back, if nece	essary.)
Would your family be willing to house one of the STEM Center'sNo Yes	s Zoology Center animals during a school br	eak?
Would you be willing to be a volunteer/chaperone for your child	d's STEM class? NoYes	
Permission to Participate: My child has permission to participate I understand and agree to the following terms of participation, u		thel-Tate Local School District.
 My child has permission to participate in the Bethel-Ta 2025-2026 school year. 	ate Gifted STEM Program provided by Bethe	l-Tate Local Schools during the
 My child has permission to attend walking school trips while under the supervision of a Bethel-Tate gifted sta of the Bethel-Tate schools, restaurant, walking path, e 	aff member. (i.e. Bethel Public Library, Grant	
 I understand that rewards may be offered for participa meet requirements. 	ation and performance and that these reward	ls may be withheld for failing to
 I understand that my child may participate in various I animals. 	learning centers, including the handling of the	e STEM Zoology Centers' live
 I understand that accounts on school approved webs the District's Acceptable Use Policies. 	sites may be created for my child and that my	/ child will be expected to follow
Parent/Guardian Signature:	Γ	Date: