



**Parental/Guardian Opt-Out of Club Participation/Event Activities
2024-2025**

Student Name _____

School _____

I hereby acknowledge receipt of information regarding student clubs/event activities that are scheduled to be operational at the school during the current school year. I understand that if a club and/or event for which information has not been provided is started after this information is distributed, I will be provided with the information at that time and my written permission will be required prior to my student's participation.

I wish to withhold permission for my child to participate in the student club(s)/event(s) listed below:

1. _____
2. _____
3. _____

I wish to withhold permission for my child to participate in ALL clubs and/or events:

YES NO

Parent/Guardian Name _____

(Please print)

Parent/Guardian Signature: _____

Date: _____

The Muscogee County School District supports the requirements of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act and does not tolerate discrimination in any form.