

Great minds don't think alike.

PARENT SIGNATURE PAGE

School Year 2024-2025

Please initial and sign where indicated and return to the school office on or before Parent Orientation.

Student Name:______Grade:_____

nt/Gua	rdian Signature:Date:
	presence in the building. Summit Academy has had an Asbestos Inspection and initiated a Management Plan in order to provide a safe environment. A complete copy of the Management Plan is kept at the facility for your inspection. Should you have any questions regarding the subject, please contact Renee Lindsey at 244-7090.
 Initials	Asbestos Notification In compliance with the Federal Register, Part 763, dated October 30, 1987, Summit Academy will "ensure that workers and the building occupants or their legal guardians, are informed at least once each school year" of asbestos
 Initials	Student Technology Use I understand that should my student damage or misuse technology, as determined by Summit Academy personnel, I may be financially responsible for the repair or replacement of the equipment or device.
 Initials	Photo/Video Release I hereby give permission for the above-named student to be photographed and videotaped during school related activities whether on or off campus. I realize that images or video recordings may be published in either print or digital form for informational or marketing purposes.
 Initials	Handbook Agreement The policies and procedures outlined in the Family Handbook serve as an agreement for services between Summit Academy and students and parents. Please read the handbook carefully. It can be found on our website at www.summit-academy.org . As the parent/guardian of the above-named student, I have read, understand, and agree to abide by the policies and procedures as stated in the Family Handbook. I understand that the contents of this handbook may change at any time, and that I will be notified of any changes.