



August 11, 2017

TO: The parents of Bartlett City Schools K-8 students

On August 21, 2017, the moon will pass between the earth and the sun for the first coast-to-coast total solar eclipse since 1918. Millions of Americans in 12 states will be able to watch this solar spectacle that will turn day into night for a couple of minutes. Tennessee is among the 12 states that have been declared to be a best place to experience this rare phenomenon.

Bartlett City Schools is planning for its students participate in this historic event. Curriculum and lectures concerning the scientific relevance of the occurrence have been prepared, and the students will be asked to participate in a safe viewing experience of the event. Bartlett City Schools has purchased and will supply solar eclipse viewing glasses to allow students to participate safely. Additionally, the curriculum has been designed to include instructions on methods of safe viewing of an eclipse complete with warnings regarding attempts to watch this event without protecting one's eyes.

Bartlett City Schools will exercise care and careful supervision for all students who participate in this event. However, to be sure that parents are well-informed of the potential risk of eye injury, we ask that you acknowledge and sign the attached release. The release contains two provisions: (1) a general release for student participation; and (2) a release of liability covering the District.

If you choose for your student to participate in this exciting educational opportunity, please complete the attached release and return to your child's school by Thursday, August 17, 2017. Any student(s) in grade K-8 attending school on August 21, 2017 who has NOT submitted the attached release will not participate in solar eclipse viewing activities, and an alternate assignment or activity will be provided.

Should you have questions concerning this correspondence, please contact your student's school.

RELEASE FOR PARTICIPATION IN SOLAR ECLIPSE ACTIVITIES

I/WE, as parent, guardian, or legal custodian of (name of student) _____ give permission for the above named student to participate in school activities related to viewing the solar eclipse on August 21, 2017. I/WE agree that participation is voluntary, and I/WE assume all risk of the student's participation, including any eye injury that may result therefrom.

I/We understand that Bartlett City Schools will provide curriculum and instruction relative to the scientific relevance of a solar eclipse, and that instruction shall includes safety warnings concerning proper methods of watching a solar eclipse. I/WE also understand that Bartlett City Schools will provide approved equipment or methods of watching the eclipse. I/WE further understand that the District will provide proper supervision for the students who participate. Finally, I/We understand that there is risk associated with this activity if proper procedures for viewing a solar eclipse are not strictly followed.

Knowing the above, I/WE release (name of student) _____ to participate in the events activities associated with observing the solar eclipse on August 21, 2107 and agree that Bartlett City Board of Education, Bartlett City Schools, and its employees and volunteers will not be held liable for any injury that may occur as a result of event participation.

This release should be returned to the school by Thursday, August 17, 2017.

Parent Signature

Parent Name Printed

Date