

Acknowledgment Form

FOR ALL AG SCIENCE / FFA MEMBERS STUDENTS ENROLLED IN CROSBY AGRICULTURE DEPARTMENT CLASSES *Please return this page of the rulebook.*

Please view the Rulebook at www.crosby.fffanow.org

For Crosby FFA/ Crosby Ag Department

Cassie Morrison, Paul Odom, Kelly Padgett, Gabby Schexnayder, Cameron Flanery

Student's Name (please print) _____

Address: _____

Please go to the www.crosby.fffanow.org website and register yearly for email notifications of events:

The above named student has my permission to attend FFA/Agriculture field trips &/or class/shop/meats lab/greenhouse/school barn activities with the Crosby Agriculture Department throughout the current school year.

We authorize the Advisors to publicize achievements/pictures of my child in School related activities on the official FFA web-site/FFA magazine, the Ag Experience Tracker-AET, in the classroom and social media.

· We have read and understand the FFA guidelines-also including livestock show rules/FFA, hold harmless agreement, officer rules and will follow instructions of FFA Advisors.

· I understand the guidelines set forth for text messaging my child,

_____, and give any and all sponsors/coaches permission to notify my child of relevant information regarding the activities they are participating in during the school year

· I know that my child must have proper PPE.

· I know that my child may be working with plants, lawn equipment, shop equipment and sharp objects.

· I also understand that my child may be handling livestock/animals/small animal management animals and agree with the animal handling regulations and hold harmless agreement in this handbook.

My student has _____ allergies (include plants or animals)

· We understand that all the rules and regulations as stated in the school handbook also apply at any school sponsored activity. We understand that the sponsor and chaperones have the right to search handbags or personal belongings for illegal items in order to protect the entire group.

Signature of parent/guardian: _____ Date _____

Email: _____

Street address: _____ City/State/Zip: _____

Emergency Contact name and number: _____