



Fort Larned Unified School District
OFFICE OF SUPERINTENDENT

120 East 6th Street
Larned, KS 67550

P: 620 285 3185
F: 620 285 3185

USD 495 Solar Eclipse Viewing Opt-Out Form

Fort Larned Families,

We are thrilled to offer our students the chance to safely experience the upcoming solar eclipse. Each student participating in the outdoor viewing must wear regulated solar eclipse glasses to protect their eyes from damage. Thanks to generous donations from Sonic, the Fort Larned Lions Club, and other community partners, we have extra glasses available. However, if your child still has their glasses from previous distributions, we kindly ask them to bring these to school on Monday for the eclipse event to ensure we have enough for everyone.

Thank you for your partnership keeping your student safe. Please note that everyday sunglasses do not protect eyes for eclipse viewing and could result in permanent eye damage. Students without proper eclipse glasses will participate in an alternative indoor activity.

Student Information:

- Student Name: _____
- Grade: _____
- School: _____

Opt-Out Acknowledgment:

I, the undersigned, do not grant permission for my child, named above, to participate in the outdoor viewing of the solar eclipse. I understand my child will be provided with an alternative indoor activity during the event.

- Parent/Guardian Name: _____
- Relationship to Student: _____
- Signature: _____
- Date: _____

Please return this form to your child's school office by Monday, April 8th, if you do NOT permit your child to participate in the outdoor solar eclipse viewing. Our priority is the safety of all students, and we want to ensure a safe and enjoyable experience for everyone involved. Thank you for your cooperation and support.