

2021 Vision and Hearing Screening
Opt Out

The Health Department will be on campus to provide vision and hearing screenings for Black River students in the coming weeks and parents have the opportunity to opt out of this testing. **If you would like your student to not be screened please return this form to the main office by Friday, September 24th.**

Student Name: _____

Student Date of Birth: ____/____/____

Service opting out of (Please Circle One):

Kindergarten Hearing

1st Grade Vision

2nd Grade Hearing

3rd Grade Vision

4th Grade Hearing

5th Grade Vision

7th Grade Vision

9th Grade Vision

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____