

HELP US HELP OUR STUDENTS

Be A Booster Club Member!

The Robert C. Byrd Athletic and Academic Boosters Club is looking for people who want to help the students at RCB. Our organization assists the academic, extracurricular and athletic programs at the high school. Parents or interested persons are invited to come and join us as we begin new programs for the school year. Volunteers are always welcome, whether in the concession stands, building new facilities, or assisting student recognition programs.

To become a Booster, simply complete the information below, and return, along with your \$5 membership fee, to: RCB Academic and Athletic Boosters

P.O. Box 728
Clarksburg, WV 26302-0728

I am interested in volunteering in:

Name _____

Address _____

Phone _____

___ concession stands ___ student relations

___ special events ___ academic events

___ sports program ___ public relations

Your interest in this worthwhile organization is greatly appreciated!

PESTICIDE APPLICATION NOTIFICATION

Robert C. Byrd High School adheres to an Integrated Pest Management Plan in accordance with Title 61, Series 12, rules of the West Virginia Department of Agriculture.

Pests are controlled primarily through preventive measures. When pesticides are required, the least hazardous materials will be used.

- Level 1 Non-Chemical (preventive)
- Level 2 Least hazardous (low toxicity, non-volatile baits or dusts)
- Level 3 EPA Caution (limited volatility liquids)
- Level 4 EPA Warning or Danger (broadcast and space treatments, spraying and fogging)

As a parent or guardian, you have the right to be notified if and when Level 3 or Level 4 pesticides are to be applied. To receive such notification, please complete the information requested below and return it to Mr. Pilewski.

Please note: Level 3 and Level 4 pesticides will not be applied when students are in the areas being treated.

TO: Mr. Leon Pilewski, Principal
Robert C. Byrd High School

DATE: _____

Please notify me at least 24 hours prior to the application of Level 3 or Level 4 pesticides at this facility.

FROM: _____
(signature of parent or guardian)

ADDRESS: _____

PHONE: _____
(home)

(work)

(cell)

Robert C. Byrd High School • One Eagle Way • Clarksburg, WV 26301