University Preparatory School

Field Trip Permission

**Parent/Guardian Permission**

I hereby give my permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Print Student Name)

to attend the following school field trip. Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Description of Activity: **Half Day AP Environmental Science**

**Date(s):** Wed. April 15th **Location:** Whiskeytown / Tower House **Info:** *Mr. Raudman for details*

Time: **Meet and Depart** at classroom 185 during 6th @12:30, **Take roll** then leave by 12:35

**Arrive** at Tower House by **1:00**, Participate in Tick Monitoring with SC Vector Control (lunch, water **AND HIKING SHOES** required.)

**Depart** back to U Prep **by 3:00** for **arrival** at **3:25.**

Supervising Staff Member(s): **Tad Raudman**

In case of accident or injury I give permission for the supervising staff member to authorize medical treatment. I understand that I am responsible for any expense incurred as a result of obtaining the necessary medical care.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Contact Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance Policy/Group Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Doctor Name and Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_** I **do not give** my student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, permission to attend this half day field study and understand that my student will need to stay at U Prep, with another teacher during the normal class periods ***and may need to make up an alternative assignment set up by Mr. Raudman****.*

\_\_\_\_\_ I give my student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ permission, but will need transportation for him/her.

\_\_\_\_\_ I give my student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ permission and can drive to/from the field study and transport \_\_\_\_\_ additional students in my vehicle. I have met DMV and School requirements for driving other students for the 2014-2015 school year.

**Hard copy** **permission slips are due Wednesday by 2nd period, April 15th.**

**Teacher Signatures:** P6:\_\_\_\_\_\_ Tutorial:\_\_\_\_\_