

Field Trip Health and Parental Permission Form

Holbrook Public Schools

Student: _____ Grade _____
First name Last name

The following Field Trip has been planned in conjunction with our curriculum and the things we are learning about in our classroom. This Field trip is designed and planned as one of an array of multiple and varied opportunities for students to gain and apply knowledge and understanding of content, concepts, and skills.

Please look over the information about the Field Trip and then sign and return this form. Thank you.

Field trip destination: Cameo Theaters Weymouth to view "Hidden Figures"
PG

Day and Date of field trip: Thurs. April 13, 2017

Who is participating: grade 8 students

Time of departure from school: 7⁴⁰ AM Time of return to school: 11³⁰ AM

Transportation: First Student bus

What you need to bring: _____

Cost: \$6.00

Please make check payable to: Holbrook Jr/Sr High School

Payment is due by: Monday, April 10, 2017

Medical issues that shall be brought to the attention of the field trip supervisor(s). Medical issues shall be specific about medications, allergies, chronic conditions, etc.:

Will this student require medication during the field trip? _____ No _____ Yes _____ (see below)

Medication: EpiPen Inhaler Oral _____

If yes, parent/guardian MUST call the school nurse at 781-815-1620 to ensure proper forms are on file for the required medication. Specific arrangements are required in advance. No student requiring and EpiPen or inhaler may attend unless the parent has provided the EpiPen or inhaler and a doctor's order is on file for such medications.

On day of the Field Trip, I can be reached at _____ or _____
Telephone number telephone number

I give permission for my child to participate in this field trip.

Parent's / Guardian's signature

Date

I am available to chaperone. Please call me at _____. We shall contact you if we are in need of a chaperone.