Parent Permission Form for a Field Trip

Payment and form due: 3/20/2024

| | School | CVHS | CVHS | | | | |
|---|---|---|---|---|--|--|--|
| Mr. Pecar | Date(s) of Tr | p 5/16/20 | 5/16/2024 | | | | |
| A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the event of an emergency. | | | | | | | |
| Share the Music Day | Destination of Trip | | Wyandot Middle School | | | | |
| (586) 723-4200 | Student Cost | | Chaperone Cost | 0 | | | |
| School Bus | Food Provision | | Lunch Provided | | | | |
| CVHS 10/12 Bldg. | Departure Time | | 7:45am | | | | |
| CVHS 10/12 Bldg. | Return Time | | 1:50pm | | | | |
| | for your child as indicated below. Field trips by. Share the Music Day (586) 723-4200 School Bus CVHS 10/12 Bldg. | Mr. Pecar Date(s) of Triple for your child as indicated below. Field trips require parent cy. Share the Music Day Destination of Student Cost School Bus Food Provision CVHS 10/12 Bldg. Date(s) of Triple for your child as indicated below. Field trips require parent cy. Destination of Destination of Cost Departure Tireless of Triple for your child as indicated below. Field trips require parent cy. | Mr. Pecar Date(s) of Trip 5/16/20 for your child as indicated below. Field trips require parent approval cy. Share the Music Day Destination of Trip Student Cost Cost School Bus Food Provision CVHS 10/12 Bldg. Date(s) of Trip 5/16/20 | Mr. Pecar Date(s) of Trip 5/16/2024 for your child as indicated below. Field trips require parent approval and information nearly. Share the Music Day Destination of Trip Wyandot Middle Student Cost Student Cost School Bus Food Provision Lunch Provided CVHS 10/12 Bldg. Date(s) of Trip 5/16/2024 | | | |

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.

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|--------------------|---------------------|-----------------------|---|-----------------------|---|
| Student Name | ⊗ | Address | | \boxtimes | |
| Parent/Guardian(s) | \boxtimes | Parent/Guardian Phone | | ➣ | |
| Secondary Contact | \boxtimes | Secondary Phone | | \boxtimes | |
| Emergency Phone | \boxtimes | Date(s) of Trip | | 5/16/2024 | |
| Activity Name | Share the Music Day | Destination of Trip | | Wyandot Middle School | |
| Destination Phone | (586) 723-4200 | Student Cost | 0 | Chaperone Cost | 0 |
| Food Provision | Lunch Provided | Transportation | | School Bus | |
| Departure Location | CVHS 10/12 Bldg. | Departure Time | | 7:45am | |
| Return Location | CVHS 10/12 Bldg. | Return Time | | 1:50pm | |

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- Field trip payments should be made in PaySchools Central, or PaySchools Events as directed by the school. Please submit a copy of your receipt to this form. Payment will be verified by the school.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

If, as a parent or guardian, you do not grant permission for participation in the above activity, please check and sign below. In this case, the child will be given related schoolwork to do in the school.

☐ My child will not be participating in the above activity.

| Parent Signature | \boxtimes | Date | \boxtimes |
|------------------|-------------|------|-------------|
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