

Coral Glades High School
GRAD BASH 2019 UNIVERSAL STUDIOS ORLANDO
IN-SCHOOL PAYMENT PERMISSION SLIP

Receipt# _____

High School Single Field Trip Parent/Legal Guardian Authorization Form

Student Name: _____ Telephone: _____

I authorize my student to utilize the following type of transportation:

School Bus _____ Charter Bus X Parental Responsibility _____ Private Vehicle _____

- No motorcycles/scooters/mopeds permitted as transportation
- Maximum capacity is one (1) person per seat belt.

- Field Trip Destination: _____ Grad Bash Orlando Universal Studios _____
- Departure Date/Time: _____ Saturday, Apr 6, 2019, 11:00 a.m. _____
- Return Date/Time: _____ Sunday, Apr 7, 2019, 7:00 a.m. _____

***Cost: \$125 Cash or money order in Cafeteria or room 230.**
***Payments may be made in person may be made from February 5 – February 22. (No refunds given.)**
***Completed permission slip due with payment.**

EMERGENCY CONTACT

In case of emergency, I may be reached at:

Name: _____ Telephone: _____

In the event that I cannot be reached, please contact:

Name: _____ Telephone: _____

HEALTH/ACCIDENT INSURANCE

My student is covered by twenty-four (24) hour student accident insurance or family insurance:

Insurance Company: _____

Policy Number: _____ (or I've attached a copy of my family insurance identification card.)

_____ I do not have insurance, however, I will pay any and all medical bills for emergency care of my student.

FORM #4359

REV 8/16

QSQ 9853/RISK MGMT 9711

Signature of Parent or Guardian

Date

This event is a school sponsored activity, therefore, the School Board of Broward County's Student Code of Conduct and Discipline will be in effect. Any infraction of these rules may result in being asked to leave the event, or school discipline, which can include suspension and expulsion.

- NO alcoholic beverages, drugs or mood-altering substances.
- NO weapons, NO fighting.
- NO explosive devices, fireworks or other potentially dangerous substances.
- Chaperones are there for your protections and to help you. They should be treated with respect.

I have read and understand these rules.

Student Signature

Date

Mrs. Bernstein's Signature

Date

GPA/OBLIGATIONS CHECK

 **Attach your GPA/Student Obligation Status found on Virtual Counselor and copy of online receipt.**

(In order to participate, students are required to attach a printout from their Virtual Counselor Account showing that they have at least a 2.0 GPA or higher and have ZERO financial obligations owed to the school. Should a student need to pay for obligations, please see the bookkeeper during A or B lunch. Only if you have an obligation should the bookkeeper sign below that the obligation was paid in full.)

Budgetkeeper's Signature: _____ Date Paid In Full: _____