



Blanche Ely High School Activities Department
Field Trip / School Activity / Parent / Teacher / Administrator / Permission Form



Cost

Student's Name: _____ Student's Phone # _____

Student's FSI: _____ Ely Sponsor: Ms. Johnson

Club/Organization: Senior Class Administrative Approval: Dr. Karlton O. Johnson

Activity: Grad Bash Destination: Orlando Universal Studios Approval: _____

Date of Activity: 4/20/18 - 4/21/18 Time: 4/20/18 1:00 p.m. -4/21/18 7:00 Obligation List (Ms. Waech) _____

Transportation: Maximum one person per seat belt, no motorcycles or mopeds permitted.

School Bus Charter Bus *Private Vehicle *Ride with another student ** Ride with Ely Staff

*Student Vehicle Authorization Form required **Adult Vehicle Authorization Form required
 (To Be Completed By Guardian)

Emergency Contact : _____ Telephone: _____

Health / Accident Insurance: My child is covered by Twenty-Four (24) Hour Accident Insurance or Family Insurance: Insurance Co. _____ Policy # _____

I do not have insurance; however, I will pay any and all medical expenses for emergency care for my child.

Teachers: Please comment if you have a concern in regard to this student's participation in this activity. Your signature verifies that the student has submitted this form to you. Final approval for participation in this activity will be made by an administrator.

Subject	Teacher's Signature	Comments
Block 1: _____	_____	_____
Block 2: _____	_____	_____
Block 3: _____	_____	_____
Block 4: _____	_____	_____
Block 5: _____	_____	_____
Block 6: _____	_____	_____
Block 7: _____	_____	_____
Block 8: _____	_____	_____

Student / Parent / Guardian Acknowledgment SIGN FRONT AND BACK

I have read and discussed the code of conduct with my child. We are in agreement with the rules as they appear on this paper. I give my permission for my child to participate in this activity.

Parent / Guardian Signature _____ Date: _____

Student Signature _____ Date: _____