Field Trip Permission Slip

** DO NOT CUT OR TEAR PAPER – RETURN COMPLETE FORM **

Student
Name:_____ Grade:_____ Teacher:_____

Field trip destination:_____

Trip date:_____ Grade/Club:_____

Mode of transportation:_____Departure time:_____ Return time:_____

Note: A student may be denied the privilege of participating in field trips, social and/or extra-curricular activities if he/she has been disruptive, violated the student code of conduct, or fails to conform with school rules and regulations.

If the field trip is cancelled or postponed, parents will receive written notification from the school. *Refunds will be contingent upon the school's contractual obligation with the approved field trip vendor.* Students unable to attend the field trip due to personal circumstances may or may not receive a refund contingent upon the school's contractual obligations with the vendor.

Parent/Guardian Name:_____**Signature**:_____

Payment Information

Cost:_____ Payment deadline:_____ Payment can be made online at estore.browardschools.com

Payment details:_____ Online Order Number:_____

*******************************Information to be taken on field trip******************************

Emergency Contact Information

Student Name:_____ Teacher:_____

In case of emergency, please contact the following person(s):

Emergency Contact – print name	Relationship to student	Telephone #

In the event I cannot be reached, please contact:

Additional Contact – print name	Relationship to student	Telephone #

Health/Accident Insurance

In the event of an accident or illness every attempt will be made to reach the emergency contact. If necessary, 911 will be called. Insurance information is not required but is strongly recommended since **parent assumes full financial responsibility for any charges incurred**. Check number 1 or 2 below.

Does your child take medication, have allergies, or special health problems? If yes, please indicate:_____

_____

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

Insurance Company / ID #	Telephone #

2._____ I do not have insurance. I understand I am responsible for all medical bills for emergency care of my child.

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Online Payment Instructions

First time users of the online payment system must have their child's student ID number available before using the online payment system!

1. Access the e-store website by entering this web address: **estore.browardschools.com**

2. Select your school

3. Select the activity that you want to purchase; i.e. club dues, field trip, yearbook, etc.

4. Click the "**Add to Cart**" button

5. If you wish to purchase more than one item or if you have more than one child that you're making a purchase for:

    Click the "**Continue Shopping**" button in the lower left portion of screen and repeat steps 4 and 5

6. Once you have completed your selection of items for purchase, click the "**Checkout**" button in the lower right portion of the screen

7. "Sign In" **or,** if this is your first time using the e-store system, enter "New User" information (enter a Username and Password that can easily be remembered)

8. Add **or** Select your child's student profile (**You must select one child for each item purchased**) New Users must add a student profile.

    To add a Student Profile, click the "Add Student Profile" button in the upper left portion of the screen and enter the student name and ID number. Select the "Save Changes" button then select your child under the student profile dropdown box on the screen.

9. Click the **"Next"** button

10. Enter or verify your billing information and select the **"Next"** button
    If you are a New User of the e-store system, enter your billing information.

11. Enter your credit card information

12. Click the **"Review Order"** button

13. Click the "Place Order" button

14. Print receipt