

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA  
STONEMAN DOUGLAS HIGH SCHOOL  
PARENT TEACHER FIELD TRIP AUTHORIZATION FORM**

**Note:** There must be a completed permission form for each student who is attending the field trip

Student Name: \_\_\_\_\_ Student #: \_\_\_\_\_ Grade: \_\_\_\_\_

Field Trip Purpose: Grad Bash – C/O 2020

Sponsoring Teacher (s): Dara Hass

Destination/Place: Universal Studios, Orlando, FL

Departure Date: April 17, 2020 Friday Time: 11:00 AM Return Date: April 18, 2020 Saturday Time: 6:00 AM

Authorized mode of transportation: Academy Bus Charters

**I authorize my child to utilize the type of transportation identified above for this field trip.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_ Best Contact Number: \_\_\_\_\_

**EMERGENCY CONTACT**

In case of emergency, I can be reached at phone number(s): \_\_\_\_\_

In the event I cannot be reached, please contact:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**HEALTH/ACCIDENT INSURANCE**

My child is covered by 24-hour student accident insurance or family insurance:

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

**NOTE:** "AT SCHOOL" Student Accident Insurance **WILL NOT** cover overnight field trips under any circumstances.

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

\_\_\_\_\_ Any pre-existing medical problems, please list: \_\_\_\_\_

\_\_\_\_\_ (Parent/Guardian Signature)

Period/Subject	Print Teacher Name	Signature	Period/Subject	Print Teacher Name	Signature
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1 <sup>st</sup> _____	5 <sup>th</sup> _____
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2 <sup>nd</sup> _____	6 <sup>th</sup> _____
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3 <sup>rd</sup> _____	7 <sup>th</sup> _____
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4 <sup>th</sup> _____	8 <sup>th</sup> _____
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**Obligation Check:** Students must clear all obligations. \_\_\_\_\_ (Bookkeeper signature)

**G.P.A. Check:** Students must verify GPA with Guidance. G.P.A. \_\_\_\_\_

(Guidance Signature)

**Administrative:** Students must obtain signature from their Administrator. \_\_\_\_\_

(Administrative Signature)

**SCHOOL ACTIVITY GENERAL RULES**

All school sponsored activities, whether they are on or off campus (including Field Trips) are subject to the School Board of Broward County's Student Conduct and Discipline Code. Adherence to all school board policies is expected. Any behavior that would constitute an infraction of these rules, or be grounds for arrest (based upon current Florida statutes) may result in school discipline which can include, but not be limited to:

- A. External Suspension
- B. Expulsion
- C. Internal Suspension
- D. Ineligibility for future school sponsored activities, including, but not limited to: Homecoming Dance, Grad Night, Grad Bash, Graduation Exercises.
- E. Loss of extracurricular and personal privileges, including, but not limited to: participation in sports and/or cheerleading; participation in clubs and organizations; parking privileges; Exploratory Teaching (teaching assistant); OJT; and any off-campus representation of Flanagan High School and the School Board of Broward County.

**STUDENT AND PARENT ACKNOWLEDGEMENT**

I have read and discussed the code with my son/daughter and we understand the code and the punishment for infractions. We are in agreement with the regulations.

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**Parent/Guardian Signature**

**Student Signature**

**PERMISSION FOR MEDICAL TREATMENT**

I, \_\_\_\_\_ being the parent/legal guardian of \_\_\_\_\_, hereby authorize any necessary medical treatment to include the administering of any medication, as prescribed by the doctor in attendance for this student while on this field trip.

In regard to the above mentioned student, I submit the following information:

Allergies to food, medications, etc (if none so state) \_\_\_\_\_

Special Medical Problems (If none, so state) \_\_\_\_\_

Is student on any continuing medication? If so, state and describe recommended dosage:

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Date of last tetanus shot: \_\_\_\_\_ Family Physician: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

# Stoneman Douglas High School - Class of 2020

## Universal's Grad Bash at Universal Studios

**Friday April 17, 2020 - 11:00 AM – 6:00 AM (approx.)**

Ticket Sales: Online January-February 29th or until sold out. Cash purchases accepted on a case by case basis. **NO CHECKS & NO REFUNDS.** **Tickets are non-transferable.** Bus will be chosen at Gradbash meeting afterschool (Date: TBD). No changes will be made to the bus list unless administration deems it necessary. If a student fails to sign up for a bus, one will be chosen for them.

### Rules & Guidelines:

- Tickets are sold to seniors only; you may purchase only ONE ticket
- **No refunds or transfers of tickets**
- Seniors purchasing a ticket must have attended 3 ½ years of high school, have earned a minimum of 17 credits, and have a minimum 2.0 GPA.
- Anyone suspended or expelled during the spring semester will be ineligible from attending Grad Bash.
- Students will need a copy of their ID and must have one on their person at all times.
- Students must be free of financial obligations to the school.
- Students must always remain on the Universal Studios premises.
- No food or drinks allowed on buses.
- Grad Bash dress code will be enforced. See attachment.
- Any behavior during a school sponsored event (and field trip) that would constitute a violation of Broward County Student Code of Conduct or be grounds for arrest (based on present Florida statutes) will result in:
  1. External suspension (up to 10 days)
  2. Ineligibility for future school sponsored activities, including but not limited to Homecoming, Prom, Graduation)
    - Loss of extracurricular and personal privileges including but not limited to sports participation, clubs and organizations, cheerleading participation, parking privileges, Exploratory Teaching, any off-campus MSD representation
    - Internal suspension and/or Expulsion

By signing below, I understand and agree to abide by the above statements, as well as the rules & regulations set forth by the School Board of Broward County, Educational Experiences, and Universal Studios.

_____	_____	_____
Student's Printed Name	Student's Signature	Date
_____	_____	_____
Parent's Printed Name	Parent's Signature	Date