

**THE SCHOOL BOARD OF BROWARD COUNTY FLORIDA
FALCON COVE MIDDLE SCHOOL – WESTON, FLORIDA
AUTHORIZATION FOR GRADE LEVEL FIELD TRIP**

I/WE, the undersigned, hereby grant (Student Name) _____ (ID#) _____
permission to participate in a Falcon Cove Middle School sponsored trip to: Universal Studios' Islands of Adventure

As a member of: FCMS 8th GRADE Field Trip

ADULT T-shirt size: *small medium large x-large*

Mode of Transportation: <u>Coach Charter Buses</u>		Cost: <u>\$233.00</u>
Depart Time: <u>5:30 am</u>	Place: <u>Falcon Cove Bus Loop</u>	Date: <u>Friday March 8, 2024</u>
Return Time: <u>11:00 pm</u>	Place: <u>Falcon Cove Bus Loop</u>	Date: <u>Friday March 8, 2024</u>
Payment Deadline: <u>December 4th - December 15th or to when we reach capacity</u>		

Field trip must be paid online at the Falcon Cove website, www.falconcove.net. When you are on the website, please see the sidebar and select online payments. Select 8th grade trip. Student's ID number is required for payment. Please print the receipt and send with completed permission form to your child's Study Hall teacher. **Payment will be accepted until capacity of 400 students has been reached.**

GUARDIAN EMERGENCY CONTACT INFORMATION

Please provide your phone numbers: _____ (home) _____ (work)

Back-up contact: _____ (name) _____ (phone)

HEALTH & INSURANCE INFORMATION

Does your child take any form of medication, have any allergies, or special health problems? ☐ Yes ☐ No

If yes, please indicate: _____

If your child is covered by 24-hour accident insurance or family insurance, please fill out the following:

Insurance Company: _____ Policy # _____

Optional: Attach a copy of the insurance identification card.

_____ I do not have insurance; however, I guarantee payment of any and all medical bills for the emergency care of this student.

STUDENT MEDICATION (Guardian Initials Required)

_____ I understand that ANY medication that my student needs to take while on the trip must be submitted through the school nurse prior to the trip. Forms for medication submission are located at the front office and must be completed in full prior to the trip.

CRITERIA FOR FIELD TRIP PARTICIPATION

For a student to attend the field trip: they must comply with the Falcon Cove Discipline Plan, demonstrating outstanding behavior from the beginning of school through March 8th.

A student who receives any of the following will lose his/her privilege to attend the trip and will forfeit all monies paid toward the trip:

Two (2) referrals with an administrative consequence

Two (2) Saturday School detentions for off track behavior

One Alternative to Suspension or External Suspension

Students unable to attend the field trip due to circumstances beyond the school realm will receive a monetary refund as long as the final deposits and payments haven't been made. Otherwise, students will receive their park admission ticket, meal voucher and t-shirt.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

STUDENT CELL PHONE NUMBER _____ STUDY HALL TEACHER _____