



*MY CHILD WILL CATCH THE BUS AT (choose one):

___ BHMS or ___ EHMS

Field Trip Permission Form

To: **Parent/Legal Guardian**
From: MAKE A DIFFERENCE DAY TEAM
School: _____

Your written permission is required for transportation of your student to a school -sponsored activity as described below:

Travel to: CASS COMMUNITY SOCIAL SERVICES
(Destination)
On: 10-28-17
(Date of Travel)
Via: SCHOOL BUS
(Method of Transportation)
For: COMMUNITY SERVICE
(Purpose of Trip)

Participating students will leave the school at 8:30 a.m. and return at approximately 12 noon.

Students will be supervised by PARENTS AND VOLUNTEERS.

In the event of a cancellation, an alternate date will be established.

Please complete the statement below and return this form to the school by _____.

Parental Consent

I, the undersigned parent or legal guardian of _____ do hereby grant permission for this student to travel as outlined above.

Signed: _____ Date: _____

Address: _____ Phone: _____

Father's Business Phone: _____ Mother's Business Phone: _____

Father's Cell Phone: _____ Mother's Cell Phone: _____

Medical/Special Need

Does your student have an allergy/medical issue or special need of which we should be aware? Yes No

If yes, please explain: _____

Will your student need to take medication during this trip? Yes No

If yes, name of medication: _____

Dosage: _____ Purpose: _____

District policy requires that an Authorization for Medication form be completed for both prescription and nonprescription medication, and that the form be on file at the school office.

Medication must be returned to the office immediately following the trip.

Reminders

- **If your student requires medication during the field trip, you must provide the medication to the teacher and explain the purpose of the medication, as well as the required dosage of the medication.**
- **Epi-pens and inhalers. If your student needs to carry an epi-pen or inhaler on his/her person at all times, the parent/legal guardian shall provide an epi-pen or inhaler (other than the epi-pen or inhaler kept at the school office) for the field trip.**
- **If the allergy or medical condition is potentially life-threatening, the school may request that the parent, guardian or other adult designated by the parent/guardian accompany the child on the field trip.**

* PLEASE BRING \$5.00 TO RIDE THE BUS *