

BROOKLYN TECHNICAL HIGH SCHOOL

Randy Asher, Principal

SCHOOL ACTIVITY PERMISSION SLIP

PART A:

Student Name: _____
LAST NAME (Print) FIRST NAME (Print)

Student Email: (Please Print Clearly): _____

OSIS # _____ Prefect: _____ Date(s) of Activity: Friday, June 24th, 2011

Activity Destination: _____ Phone#: _____

Purpose of Activity: Senior Prom

Address: Pier 60 Chelsea Piers, Manhattan New York

Teacher Sponsor: Mr. Joe Kaelin School Phone #: 718-804-6463

PART B – PARENT CONSENT

I, the parent/guardian of the student named above hereby give my permission for my child to take part in the activity described above (see other side).

PARENT’S SIGNATURE: _____ Date: _____

PART C – SUBJECT TEACHER(S) CONSENT:

Not applicable

PART D – SUPERINTENDENT PERMISSION

IF THIS ACTIVITY IS OUT OF THE BUILDING, THE APPROPRIATE SUPERINTENDENT PERMISSION FORM IS ON FILE. (Note: Form is to be filled out two weeks in advance.)

PART E – ATTENDANCE:

IN ORDER TO RECORD THE STUDENT’S ATTENDANCE FOR THE ABOVE ACTIVITY, COMPLETE & FORWARD FORM AFTER THE ACTIVITY TO THE COMPUTER ROOM (1E17).

Student attended: YES: _____ NO: _____ ACTIVITY: _____

PART F:

I understand that the following conditions apply:

A. My child is expected to travel to the trip destination
() ACCOMPANIED (Y) UNACCOMPANIED

B. My child is expected to travel from the trip destination
() ACCOMPANIED (Y) UNACCOMPANIED

Departure Site: Pier 60, Chelsea Piers

Departure Time: 7:30 PM

Return Site: Pier 60, Chelsea Piers

Estimated Return Time: 12:30AM

Mode of Transportation: N/A

Cost of Trip for Each Student: \$165

Scheduled Activities: An evening of dancing and dinner to create memorable memories for seniors.

After reading the scheduled activities above, I have indicated any and all activities my child should not participate in: (please include all water related activities, water sports and use of physical fitness equipment).

for the following reasons: _____
(If your child can participate in all scheduled activities listed on the consent form, please write "NONE" and initial your response)

I understand that if as a parent I believe it is necessary to limit my child's activity to a great extent, the school may not be able to accommodate my child on this trip and that I and my child will be informed of the decision as soon as possible upon receipt by the school of this completed consent form.

I agree not to hold the school, any of its employees, the Department of Education, any of its employees or its representatives responsible for any expenses or injuries that my child may incur while engaged in the trip. I understand that my child is responsible for his/her behavior at all times and that my child may be sent home unaccompanied at my expense if he/she misbehaves.

I understand that alcoholic beverages and/or illegal drugs are prohibited and have discussed this prohibition with my child. I understand that if my child is found in possession of these substances, he/she will be subject to school disciplinary procedures and possible criminal prosecution.

I understand that students who have violated the school's discipline code may be excluded by the school from participating in a trip.

I agree that in the event of any injury or illness the teacher in charge of the trip may act on my behalf in obtaining medical treatment for my child. I have indicated on the bottom of this form any permanent or temporary medical or other condition(s) including special dietary and medical needs, or the need for visual and auditory aids, which should be known about my child.

I understand that my child cannot participate in this trip or in any other school trip without my express written permission to do so, which I give by signing this notification and consent form.

SIGNATURE OF PARENT/GUARDIAN

DATE: _____