

NOTE: Additional trip information may be attached to this form based upon the unique circumstances of a particular trip. All other modifications require approval of the Office of Legal Services.

PARENT NOTIFICATION/CONSENT FORM New York City Department of Education (DOE)-Sponsored DAY TRIP

Nam	ne:	Class:				
Sch	ool (list additional trip sponsors when applicable):	Trip	Trip Date:// _			
Trip	Coordinator:					
Des	tination:					
Departure Site:		Departure Time:				
Retu	urn Site:	Return Time:				
Mod	de of Transportation:					
Purp	pose of Trip:					
Spe	ecific Clothing/ Equipment Required for this Trip:					
	s trip will include the following physical and sports activititing):	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	riding, ice	skating,	skiing 	
a)	I understand that there are risks of injury associated with th to my child's participation in all these activities except for the		orts activities	s and I co	nsent	
b)	Please indicate below any permanent or temporary me medication needs, or the need for visual or auditory aids, v			al dietary	and	

- c) I agree that in the event of an emergency injury or illness, the staff member(s) in charge of the trip may act on my behalf and at my expense in obtaining medical treatment for my child.
- d) I understand that my child is expected to behave responsibly and to follow the school's discipline code and policies.

- e) I agree and understand that I am responsible for the actions of my child. I release the school from all claims and liability that arise in connection with the trip, except if due to the negligence of school officials.
- f) I understand that I am responsible for getting my child to and from the departure and return sites identified above. I understand that my child shall be accompanied by staff member(s) during the trip, including while traveling from the departure site to the destination site, and from the destination site to the return site.
- g) 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, they will be subject to school disciplinary procedures and possible criminal prosecution.

	school disciplinary procedures and possible criminal p	rosecution.							
h)	I understand that students who violate the school's dis from participating in a trip.	cipline code r	may be excl	uded in the future by the school					
i)	In an emergency I can be reached at: Day: ()		Evening	Evening: ()					
	Additional Contact: Name:	_ Day: ()		Evening: ()					
j)	I give my permission for my child to participate in this	school trip.							
	(Signature of Parent/Guardian)			(Date)					
STUDENT DECLARATION									
(to be signed by Middle School and High School students)									
	ave read this form and I understand that I am to act or pected to conduct myself in school.	n this trip in tl	he same re	sponsible manner in which I am					
	(Signature of Student)			(Date)					