

SRA. CHÁVEZ-FRANCO

COST = \$10.00

**Edsel Ford High School
Dearborn Public Schools
Field Trip Agreement
Parent – Pupil Notification Slip**

I hereby give my permission for _____ to attend and take part in the field Trip

To **D.I.A. & MEXICAN TOWN FOR LUNCH** on **FRIDAY, OCTOBER 19, 2018** with (teacher) **Sra. Chávez-Franco, Srta. Dean,
Sra. Azzopardi & Mme. Katzman**

I understand that the student is not required to participate in this field trip, that it is not part of the student's required curriculum, and that should I decline to sign and return this form, the School district will provide an alternative educational experience for the student for the duration of the field trip.

I understand that, during this field trip, the student is expected to follow all school rules and will cooperate with, and follow the directions of, the teachers, chaperons and bus drivers.

I agree to hold the Dearborn Public Schools and its employees harmless from all damages, costs and attorney fees incurred as a result of any injury or damages caused by the student during the course of this field trip.

In the event that the student mentioned above requires any medical, dental or hospital treatment whatsoever, I/We hereby specifically authorize the Dearborn Schools, its employees, its agents or servants, to obtain whatever medical, dental or hospitalization treatment which deems necessary. I/We further agree to pay to the medical or dental treating facility any and all costs incurred as a result of said treatment; further, in the event that the Dearborn Schools is compelled to pay for such medical or dental treatment, I/We hereby specifically agree to reimburse said school district for all costs which may have incurred.

Medical information of which the Coach should be aware of and medications* needed by the student:

*Medication authorization form must be on file in the school office.

Phone numbers where the parent/legal guardian can be reached during the field trip.

HOME PHONE _____ WORK PHONE _____

PARENT OR GUARDIAN'S SIGNATURE _____

MODE OF TRANSPORTATION: _____ Commercial Bus _____ Private Vehicle X **School Bus Provided by D.I.A.**
_____ Dearborn School Bus _____ Walking

TO TEACHERS AND STUDENTS

IT IS THE STUDENT'S RESPONSIBILITY to be certain that **each teacher is notified** and sign the appropriate hour below (only classes that will be missed because of the field trip will be necessary.) In addition it is the student's responsibility to prearrange the make up of all assignments, quizzes, tests and other class work for that day (s).

IT IS THE TEACHER'S RESPONSIBILITY, when signing a field trip form, that a note be made in their attendance book of such field trip so that the student is not marked absent.

FIRST HOUR _____ **FOURTH HOUR** _____

SECOND HOUR _____ **FIFTH HOUR** _____

THIRD HOUR _____ **SIXTH HOUR** _____

PLEASE NOTE:

THIS FORM MUST BE RETURNED TO THE TEACHER SPONSORING THE FIELD TRIP. SPONSORING TEACHER MUST THEN TURN IN ALL FIELD TRIP FORMS TO THE STUDENT OFFICE THE DAY AFTER THE FIELD TRIP.