

Charlotte Lab School Parent Notification/Consent Form



Student: _____ Advisor: _____

Destination: Kinetic Heights

Trip Date: 9/8/17

Depart School: 10:30

Return to School: 2:00 (return at 2:30)

Mode of Transportation: Bus service by Eagle Bus

Purpose of Trip: Middle School students and advisors will build connections through various team building activities. Students will have an opportunity to build connections, gain self awareness, and create a stronger sense of community.

Please ensure your child is in their school uniform, is wearing tennis shoes, weather appropriate outerwear, and has a disposable lunch.

Cost per Student * Covers Kinetic Heights activities (\$20) and bus transportation (\$6)	\$ 26
Complimentary lunch students - please check if you want the school to provide lunch for this field trip.	<input checked="" type="checkbox"/>
Purchase Bagged Lunch \$5 (communicate by 9/1)	\$ 5
(circle) Cash or Check made out to Charlotte Lab School	
Kinetic Heights Waiver	

* If you pay \$30, the additional \$4 will be used as financial assistance for other students.

I, the parent/guardian of the student named above, hereby give my permission for my child to take part in the school trip described above.

- A. I understand that there are potential risks associated with the above-listed activities and I consent to my child's participation in all activities except for the following: _____
- B. Please indicate below any permanent or temporary medical or other condition including special dietary and medication needs, or the need for visual or auditory aids, which should be known about your child:

- C. I understand that as a parent, if I believe it is necessary to limit my child's activity to a great extent, then the school may not be able to accommodate my child on this trip and that I and my child will be informed of this decision as soon as possible upon the receipt by the school of this completed consent form.
- D. 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.
- E. I understand that my child is expected to behave responsibly and to follow the school's discipline code and policies.
- F. I agree and understand that I am responsible for the actions of my child, and I release the school from all claims and liabilities that arise in connection with the trip, except if due to the negligence of school officials.
- G. 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.
- H. I understand that students who violate the school's discipline code may be excluded in the future by the school from participating in a trip.
- I. In an emergency I can be reached at: Day: (_____) _____ Evening: (_____) _____

I give my permission for my child to participate in this school trip.

(Signature of Parent/Guardian)

(Date)