EATON RAPIDS HIGH SCHOOL
FIELD TRIP PERMISSION FORM

(This form must be submitted to administration, completed, before the trip takes place!)

Class: High School Band Instructor: Mr. Adam Gumbrecht
Student Name: _____
Grade: 9 10 11 12
Address: _____
Home Phone: _____ Cell Phone:_____
Work Phone: _____
Destination: Kimball YMCA Nature Center
Purpose: Band Camp
Date/Time Leaving: August 9 or August 10, 2008
Date/Time Returning: August 16, 2008
Activities Planned: Learn halftime, pre-game, and parade dance
Out-of-Pocket expenses expected: money for snacks- optional

In an effort to provide a safe and successful field trip for the students of Eaton Rapids High School, we request that the student and their parent/guardian read and sign this form. All students will be under guidelines of the *Student Handbook*. Any misconduct will be handled under due process as set forth in the Handbook.

Code of Conduct: In compliance with the *Student Handbook,* please make special note of the following:

1. No use or possession of alcohol.
2. No use or possession of illegal drugs.
3. No smoking
4. Proper behavior appropriate of Eaton Rapids students at all times.

Students in attendance will be subject to the jurisdiction of the teacher and chaperones in charge of the field trip. Failure to comply with the teacher's directions will be considered grounds for disciplinary action justified in the *Student Handbook.*

Parent/Guardian: I understand that our student will be expected to maintain the above guidelines and we feel that our child completely understands the limitations of the above mentioned code.
If the situation should arise where my student is injured and the injury, in the judgment of the teacher, needs medical attention, I give my permission to seek medical attention. All efforts will be made to contact me as soon as possible. If my student is required to take any medication (prescription or not) while on this trip, the medication must be kept and dispensed by the teacher/chaperone and an *Authorization for Administering Medication* must be signed in addition to this form.

Parent/Guardian Signature:_____ Date:_____

Student: I understand and agree to abide by the above mentioned *Code of Conduct* and all situations covered in the *Student Handbook*. Knowing that my conduct represents Eaton Rapids High School, I will conduct myself in a responsible manner.

Student Signature:_____ Date:_____