



**Blanche Ely High School Activities Department**  
**Field Trip / School Activity / Parent / Teacher / Administrator / Permission Form**



**Cost \$36**

Student's Name: \_\_\_\_\_ Student's Phone # \_\_\_\_\_

Student's FSI: \_\_\_\_\_ Ely Sponsor: Mr. Barrow

Club/Organization: Science Magnet Administrative Approval: Dr. Johnson

Activity: Research Destination: Miami Zoo Approval: \_\_\_\_\_

Date of Activity: 5/31/2017 Time: 7:30 a.m. - 4:30 p.m. Obligation List (Ms. Waech) \_\_\_\_\_

Transportation: Maximum one person per seat belt, no motorcycles or mopeds permitted.

School Bus  Charter Bus  \*Private Vehicle  \*Ride with another student  \*\* Ride with Ely Staff

\*Student Vehicle Authorization Form required \*\*Adult Vehicle Authorization Form required  
 (To Be Completed By Guardian)

Emergency Contact : \_\_\_\_\_ Telephone: \_\_\_\_\_

Health / Accident Insurance: My child is covered by Twenty-Four (24) Hour Accident Insurance or Family Insurance: Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

I do not have insurance; however, I will pay any and all medical expenses for emergency care for my child.

Teachers: Please comment if you have a concern in regard to this student's participation in this activity. Your signature verifies that the student has submitted this form to you. Final approval for participation in this activity will be made by an administrator.

| Subject        | Teacher's Signature | Comments |
|----------------|---------------------|----------|
| Block 1: _____ | _____               | _____    |
| Block 2: _____ | _____               | _____    |
| Block 3: _____ | _____               | _____    |
| Block 4: _____ | _____               | _____    |
| Block 5: _____ | _____               | _____    |
| Block 6: _____ | _____               | _____    |
| Block 7: _____ | _____               | _____    |
| Block 8: _____ | _____               | _____    |

**Student / Parent / Guardian Acknowledgment SIGN FRONT AND BACK**

I have read and discussed the code of conduct with my child. We are in agreement with the rules as they appear on this paper. I give my permission for my child to participate in this activity.

Parent / Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_