

## High School Mt. Major Hike



High School Field Trip

School date: <b>Tuesday, October 4</b>	Cost/child: <b>\$15.00</b>	Checks payable to: <b>BCA</b>
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Drop off at First Church of Christ, 4 Church St, Bradford: **7:45 AM** Pick up at First Church of Christ, 4 Church St. Bradford: **3:00 PM** 

Student Transportation: Students and Teachers will take buses to and from Mt. Major

\*\*Students should bring a bag lunch – if students have already purchased via Mama G's catering, she will have bag lunches ready to go for them that day.\*\*

This form and your payment must be returned by: Thursday, September 29

## High School Mt. Major Hike

October 4

## **Medical & Emergency Care Information**

Student Name	Date of Birth	Grade:
Address		
Parent/Guardian Name		
Parent/Guardian can be reached on	the day of the field trip at the fol	lowing phone number(s):
1)	2)	
Check all that apply:		
None		
Allergic to:		
Significant medical conditions and tr	eatment:	<del></del>
Needs to receive the following medic		
		Time to be given:
If taking medication on the field to		
Parent / guardian will deliver		the school
Teacher should obtain this me		
I, the parent/guardian, authorize the school		
my child in taking the mediations listed a		
individual of official capacity who is dire	_	
medication. I understand that a chaperone	•	•
carry my child's medication. In the event	-	
have my permission to obtain any emerge		- · · · · · · · · · · · · · · · · · · ·
trip.	mey care necessary to ensure my	omita 5 went being white on the field
p.		
My child has permission to attend the Mt	Major field trip October 4 2016	I have completed the emergency
information requested above (for your chi	2	
child to attend).	na s sajety, an ingermation reques	sieu must se provideu in order jor you
Parent / Guardian Signature	<u>Date</u>	
~		DA