

Nat'l Park/Tsongus Field Trip- Lowell, MA- Bradford Christian Academy -Grades 7th-8th

School date: <u>June 1, 2023</u>	Cost/child: \$13	Checks/Cash of	r Online Payment thru VANCO
Regular School Day Drop off an Student Transportation: School V		t Transportation	
Lunch: **Students should brin	ıg a bag lunch & drink	labeled with nam	e/grade**
Bottom section of this form and p	oayment <mark>MUST be retur</mark>	ned by: Tuesday,	May 23, 2023
Nat'l	RETURN THIS SECTION OF I Parks/Tsongas — T		•
	Medical & Emergency	Care Informatio	<u>n</u>
Student NameAddress	Dat		
Parent / Guardian Name Parent / Guardian can be reached			
Parent / Guardian can be reached 1)			g phone number(s):
	Medical Info	ormation_	
Check all that apply:			
None Allowsia to			
Allergic to: Significant medical conditions a Needs to receive the following r Name of medication and Do If taking medication on the f			
Needs to receive the following r	nedication while on the tri	p:	
Name of medication and Do	ese:	Time to be g	iven:
If taking medication on the f	field trip you must check of	one below:	
Parent / guardian will de	eliver medication from hor	me supply to the sch	ool
Teacher should obtain the	his medication from my ch	nild's supply kept by	the school
I, the parent/guardian, authorize the child in taking the mediations listed individual of official capacity who is medication. I understand that a chapchild's medication. In the event of appermission to obtain any emergency	above, and I agree not to he s directed by me and the so erone, teacher or other respondences on emergency or serious illu	nold liable, any mem chool administrator to ponsible adult design ness, I request that yo	ber of the school staff or an o assist my child in taking said nated by the principal may carry my ou contact me. You have my
My child has permission to attend th Lowell, MA 01852 field trip Thurso (for your child's safety, all informati	day, June 1, 2023 and I ha	ive completed the em	nergency information requested above
Parent/Guardian Signature	 Date		
J			Pd
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