

BRADFORD

CHRISTIAN ACADEMY

Class of 2020 Senior Trip - New York City, June 1-4, 2020

TRANSPORTATION:

Departure on June 1: Students are to arrive at South Station in Boston by 9am on Monday, June 1 departure on the Megabus, to arrive in New York City at approximately 3:30pm.

Return on June 4: The group will depart from New York City at 8:30pm, to return to South Station by approximately 1:40am (early Friday morning), where parents will pick them up.

COST: \$600 ... Payable to BCA

Please submit a minimum **non-refundable deposit of \$150** by **December 4th**

TO PAY IN FULL: - *Discounted*

Discounted price of \$550 if PAID IN FULL by December 4th

TO PAY INSTALLMENTS:

If you wish to pay by **installments:** Please submit payments by the following deadlines:

Dec 20th - \$100

Jan 24th - \$100

Feb 28th - \$250

FULL PAYMENT DUE: February 28th

If not paid in full by February 28th additional fees may apply.

****Students should bring their own snacks or extra money for snacks or extra meals, if desired, and any spending money for souvenirs, etc. Breakfasts and Dinners are provided.**

If you have questions please direct them to Mr. Indrelie.

CHAPERONES: Mr. Brian Indrelie, Loren Stevens and other BCA Faculty/Staff. We will be staying at Hosteling International in dormitory style housing: You may contact Brian Indrelie on his cell 978-335-4505 with any issues during the trip.

ITINERARY: Current activities include but not limited to: Lion King; Phantom of the Opera; NY Yankees Game; Chinese Dim Sum; Stumptown Coffee Roasters Coffee House; Manhattan Mall; Times Square; Central Park. Some events may be weather dependent and exacts times are subject to change.

Medical & Emergency Care Information - THIS SECTION IS CONTINUED ON NEXT PAGE

Student Name _____ Date of Birth _____

Grade _____

Address _____

Parent / Guardian Name _____

Parent / Guardian can be reached on the days of the field trip at the following phone number(s):

1) _____ 2) _____

CONTINUED...on next page

CONTINUED...below

Medical Information - Check all that apply:

None

Allergic to: _____

Significant medical conditions and treatment: _____

___ Needs to receive the following medication while on the trip: _____

Name of medication and Dose: _____ Time to be given: _____

If taking medication on the field trip you must check one below:

___ Parent / guardian will deliver medication from home supply to the school

___ Teacher should obtain this medication from my child's supply kept by the school

I, the parent/guardian, authorize the school administrator to direct members of the school staff to assist/supervise my child in taking the medications listed above, and I agree not to hold liable, any member of the school staff or an individual of official capacity who is directed by me and the school administrator to assist my child in taking said medication. I understand that a chaperone, teacher or other responsible adult designated by the principal may carry my child's medication. In the event of an emergency serious illness, I request that you contact me. You have my permission to obtain any emergency care necessary to ensure my child's well-being while on the field trip.

My child has permission to attend the Class of 2020 Senior Trip June 1 - June 4, 2020 to New York City, NY *(for your child's safety, all information requested above must be provided in order for your child to attend).*

Parent/Guardian Signature and Date

Release for drive and other activities for this Senior NYC trip.

My child and I fully understand the nature of this trip. I am aware of the risks of accidental and/or other physical injuries that could occur by participating in this Activity. I expressly agree and intend that my child's participation in these activities shall be undertaken by my child at his/her own risk and that neither Brian Indrelie, Loren Stevens, nor any other BCA Faculty/Staff Chaperones, nor Bradford Christian Academy nor its trustees, officers, employees nor assigns shall be liable for any injuries, damages, claims, demands, actions or causes of action whatsoever which may arise out of or in connection with my child's participation in this activity. These risks include, but are not limited to, (1) loss or damage to personal property; (2) injury or fatality due to, and/or related to, (a) traveling to and from and/or during the Activity, (b) exposure to inclement weather, and all the risks inherent in an urban environment, (c) slips and falls, and (d) any and all other aspects and stresses related to the Activity.

The terms of this Release of Liability are to be governed by and construed under the laws of the Commonwealth of Massachusetts. In the event any term or provision of this Release of Liability is found to be unenforceable or void, in whole or in part, the term or provision concerned shall be construed as valid and enforceable to the maximum extent permitted by law, and the balance of this Release of Liability shall remain in full force and effect.

Parent/Guardian Signatures and Date:

Parent/Guardian Printed Names:
