



**San Tan Charter School
Field Trip Waiver and Permission Agreement**

To participate in the field trip please complete this form and return to the school

Due no later than Friday, September 25, 2015

**Destination Cost: \$155.00
All Payments are Non-Refundable**

Destination Address: Turbo-Crash Camp 228 Camp Tortue Drive, Peapack NJ

Departure Date/Time: Wednesday, October 28 7:00 AM

Return Date/Time: Friday, October 30 2:00 PM

Each attendee will need to bring: Snack Lunch for the Wednesday 10/28.

IMPORTANT INFORMATION:

All attendees must be current \$710 students. Please wear your \$710 shirt if possible and closed toe shoes.
All attendees MUST ride the school bus to and from the event.

Student Name: _____ **Grade/Teacher:** _____

Student T-Shirt Size: _____ (Please specify youth or adult)

Parent/Guardian Name(s): _____

Phone No.: _____

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I hereby give permission to San Tan Charter School, its staff and volunteers, supervisors or representatives associated with this event to transport my child to a hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

Name & Relationship: _____ **Phone:** _____

Family Doctor: _____ **Phone:** _____

Family Health Plan Carrier: _____ **Policy No.:** _____

DISCLAIMER: By submitting medications at present, by still utilizing all such medications necessary, and such medications will be utilized. Names of medications and concise directions for using them that the child takes such medications, including dosage and frequencies of dosage are as follows:

1) Medication Name: _____ Dosage/Use: _____

2) Medication Name: _____ Dosage/Use: _____

3) Medication Name: _____ Dosage/Use: _____

Allergies: _____

Additional Medical Conditions: _____