

Discovery High School
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The Bronx's Arts-Integrated High School

Rolando Rivera, Principal

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Parent Notification/Consent Form Day Trip

Name _____ Class _____
School _____ Trip Date: ____ / ____ / ____
Destination: _____
Advisor(s): _____
Departure Site: _____ Departure Time: _____
Return Site: _____ Return Time: _____
Mode of Transportation: _____
Purpose of Trip: Discovery High School Universal School Trip

Specific Activities Planned: _____

I, the parent/guardian of the student named above, hereby give my permission for my child to take part in the trip described above, I understand that the following conditions apply:

- a) I understand that I am responsible for getting my child to and from the departure and return sites identified above. I understand that my child shall be accompanied by staff member(s) during the trip, including while traveling from the departure site to the destination site, and from the destination site to the return site.
- b) I understand that my child is expected to behave responsibly and follow the school's discipline code and policies.
- c) I agree and understand that I am responsible for the actions of my child, and I release the school from all claims and liabilities that arise in connection with the trip, except if due to the negligence of school officials.
- d) I confirm that my child is medically fit and able to participate in all activities described above, except for the following activities:

e) I have indicated below any permanent or temporary medical or other condition(s) including special dietary and medication needs, or the need for visual or auditory aids, which should be known about my child: _____

f) I understand that as a parent, if I believe it is necessary to limit my child's activity to a great extent, then the school may not be able to accommodate my child on this trip and that I and my child will be informed of this decision as soon as possible upon the receipt by the school of this completed consent form.

g) I agree that in the event of an emergency or illness, the staff member(s) in charge of the trip may act on my behalf and at my expense in obtaining medical treatment for my child.

h) I understand that students who violate the school's discipline code may be excluded in the future by the school from participating in a trip.

i) In an emergency I can be reached at: Day:(____)_____ Evening:(____)_____

Additional Contact: Name _____ Day:(____)_____ Evening:(____)_____

j) I give my permission for my child to participate in this school trip.

(Signature of Parent/Guardian)

(Date)

STUDENT DECLARATION
(to be signed by Middle School and High School students)

I have read the Parent Notification/Consent Form and I understand that I am to act on this trip in the same responsible manner in which I am expected to conduct myself in school.

(Signature of Student)

(Date)