



## FIELD TRIP PERMISSION FORM

<b>Place:</b>	LEGOLAND, Winter Haven FL
<b>Date:</b>	Wednesday, May 29, 2019
<b>Time:</b>	7:30 am – 7:30 pm
<b>Purpose:</b>	Students will observe LEGO motorized creations and other park activities.
<b>Cost:</b>	\$50 student bus & ticket, \$65 chaperone bus & ticket check payable to ISTC (\$25 first payment for each person and \$25/\$40 second payment or you may pay all at once)
<b>Transportation:</b>	Taking 2 charter buses, seats available on first paid basis
<b>Students should wear:</b>	Uniform or Brick Builder/Robotics T-shirt.
<b>Notes:</b>	This is a before/after school field trip. Students will need to be here before school hours and picked up after school hours. We will contact you when we are 30 minutes away, but the plan is to arrive back at school around 7:30pm.

**\*\* STUDENTS WHO HAVE HAD MAJOR DISCIPLINARY ACTION UP UNTIL THE DAY BEFORE THE TRIP MAY NOT BE PERMITTED TO PARTICIPATE \*\***

**Please return this permission slip with 1<sup>st</sup> payment of \$25 for each person going by: April 30<sup>th</sup>. Balance due May 6<sup>th</sup>**

\_\_\_\_\_ I am interested in volunteering as a chaperone for the trip. **(Must have clearance.)**

There are **unlimited** chaperone spots available, but a limited number of bus seats. To get the group rate, you must pay in advance.

Enclosed is \$ \_\_\_\_\_ check to cover the cost of the trip or first payment. (please circle)

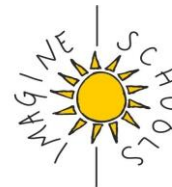
If you wish, you may include additional money to pay for a student who cannot afford to pay for the trip.

## CHARTER BUS PERMISSION FORM

I give permission for my child \_\_\_\_\_, homeroom \_\_\_\_\_ to attend LEGOLAND field trip and ride the charter bus.

**In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:**

<i>Parent/Guardian Signature</i>	<i>Date</i>	<i>Phone</i>
<i>Emergency Contact</i>	<i>Phone</i>	<i>Relationship</i>



**PRIVATE CAR TRANSPORTATION PERMISSION FORM**

<b>Place:</b>	LEGOLAND, Winter Haven FL
<b>Date:</b>	Wednesday, May 29, 2019
<b>Time:</b>	7:30 am – 7:30 pm
<b>Purpose:</b>	Students will observe LEGO motorized creations and other park activities.
<b>Cost:</b>	\$20 student, \$35 chaperone ticket check payable to ISTC
<b>Transportation:</b>	PRIVATE CAR
<b>Students should wear:</b>	Uniform or Brick Builder/Robotics T-shirt.

**\*\* STUDENTS WHO HAVE HAD MAJOR DISCIPLINARY ACTION UP UNTIL THE DAY BEFORE THE TRIP MAY NOT BE PERMITTED TO PARTICIPATE \*\***

**Please return this permission slip with payment for tickets only by May 6<sup>th</sup> .**

\_\_\_\_\_ I am interested in volunteering as a chaperone for the trip. **(Must have clearance.)**

Enclosed is \$ \_\_\_\_\_ check to cover the cost of the tickets.

If you wish, you may include additional money to pay for a student who cannot afford to pay for the trip

I give permission for my child \_\_\_\_\_ homeroom: \_\_\_\_\_ to attend the above named trip.

**My child will travel via private car transportation with**

Adult Name: \_\_\_\_\_ Contact #: \_\_\_\_\_

I, the undersigned, am the parent or legal guardian having custody of a minor pupil who attends Imagine School at Town Center. I hereby give my permission to said son/daughter, or ward to travel by private care to LEGOLAND.

I understand that the school does not purchase, or have, medical/dental/hospitalization insurance to cover injuries to loss of life of pupils or to indemnify parent for expenses in connection therewith.

I understand that all persons traveling in private cars shall be deemed to have waived all claims against Imagine Schools Inc. and Flagler School District to injury, accident, illness, or death occurring during the transportation in a private car.

**In case of an emergency, I give permission for my child to receive medical treatment.**  
**In case of such an emergency, please contact:**

_____	_____	_____
<i>Parent/Guardian Signature</i>	<i>Phone</i>	<i>Date</i>
_____	_____	_____
<b>Emergency Contact</b>	<b>Phone</b>	<b>Relationship</b>

